

Health Care Options Program – RFP# 06-55000
Proposer Questions and OFFICIAL Answers
February 16, 2007

#	RFP Reference	RFP Section	Pg #	Question/Comments	Responses
1	RFP Main	K.3.e.6	30	When during the RFP process are reference calls made and who will be making those calls?	Reference calls are made towards the end of the RFP process. The reference calls are performed by a combination of evaluators from the various proposal evaluation teams and a pre-determined set of questions are asked of all references.
2	RFP Main	K.3.e.6	30	What is the approximate time frame that references should plan for the reference call?	Normally, 30 minutes are spent on reference calls. The evaluators call each reference that is provided in order to schedule appointments that are convenient for both the reference and the evaluators.
3	RFP Main	K.3.j.4.k	41	It appears that Proposers are required to respond to the requirements in Section K.3.j.4.k but there are no evaluation questions or points associated with that section. Is that correct?	Correct. Specific questions associated with an automated system were not asked because Proposers are not required to propose an automated system. Since an automated system cannot be required, Proposals cannot be evaluated from that perspective and, as such, there are no points associated with that section. Proposals can only be evaluated from the perspective of what has been proposed that is of benefit to the CDHS. Each evaluation question section ends with the question 'to what extent has the Proposer proposed a quality service that meets or exceeds the requirements of this section'? That question is asked for the purpose of determining whether a manual or an

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					automated system is proposed and, if automated, what is it about the system that exceeds the Contract requirements.
4	RFP Main	K.3.j.4.k	41	Does that mean, then, that points that relate to these answers may be scattered throughout the remaining answers?	Yes. If an automated system is proposed, CDHS expects to see references made to this area when evaluating areas where the Proposer is discussing support of the Contract.
5	RFP Main	K.3.j.4.k	41	Since the HPE section will not be evaluated, should we put our responses in the sections that will be evaluated?	The Proposer is to decide how to put the response together. The Proposer is to describe where the requirements/answers to a particular question are discussed.
6	RFP Main	K.3.j.4.k	41	Does that mean it would be admissible to refer to this section from another section to tap into those 50 pages?	Yes, the Proposer may refer to this section from another section.
7	RFP Main	K.3.j.4.k	41	And that won't be seen as skirting the page for another section?	No.
8	General			In order to accurately estimate costs, would CDHS please provide a list of all toll free numbers used in the operation of the current HCO contract and each number's primary purpose (Call Center, Help Desk, Fax line, etc.)?	This information is located in the Data Library.

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9	General			Would CDHS please provide the current telecommunication vendor's standard bandwidth reports for each circuit connected from the HCO Program to a State entity? If this report is not available, would CDHS please provide, for each State entity, the number of file transfers made on a daily and weekly basis and the average and largest file size of each file? This information will assist Bidders in accurately determining the bandwidth for the network.	The bandwidth is 1 Meg PVC. One (1) primary circuit is utilized to connect to the CDHS MEDS system. The circuit is utilized for file transfers and on-line inquiries.
10	General			The Data Library includes the MAXIMUS CA HCO Project Organization Chart as of 1/31/06. It was provided with a cover letter to CDHS on 2/3/06 with the Subject: CA HCO Contract #01-15932 Section 2.4.1.5(1)(C)(4) with a reference identifying it as the "current RDM-M-M07 MAXIMUS CA HCO Project Organization Chart". Would CDHS please provide a current version of the above organization chart?	This information is located in the Data Library.
11	General			Would CDHS please clarify if there are any eligible beneficiaries	The requested information is copies and not readily available. The question is not

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				that do not receive an informing packet (i.e. newborns)? If there are, would CDHS please provide the name and a description of each eligible beneficiary type?	specific enough to provide an answer with 100% certainty. If the purpose of the inquiry is to determine potential volume of mailing, that information can be determined by other information available in the data library.
12	General			Would CDHS please provide details on what is currently used as a unique identifier for each beneficiary within the HPE System? (Format, length, character type, unique characteristics, etc.)	The Client Identification Number (CIN) is the unique identifier for each beneficiary. The CIN begins with a '9' followed by 7 numeric digits followed by an alpha – character other than B, I, J, K, L, O, P, Q, R or Z and ending with a numeric check-digit.
13	General			Would CDHS please provide information on what changes to eligibility or demographic information would result in a change in aid code, and thus trigger additional transactions by the HCO Contractor?	Information related to this topic can be found in the Data Library. Few changes to aid codes have occurred in this contract.
14	General			Would CDHS please confirm that the HCO Contractor will be the only entity processing HCO enrollments for the counties in the CA HCO Program?	It is anticipated that HCO will be the only entity processing HCO enrollments for the counties in the California HCO Program.
15	General			In the Data Library, in the CA HCO Contract Deliverables Tracking Report Log - February 2006, it references an Annual and Quarterly Financial Statement that is currently being submitted by the	This information is located in the Data Library.

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				current CA HCO vendor. Would CDHS please include a copy of both the Annual and Quarterly Statements in the Data Library?	
16	General			Would CDHS please provide the current default enrollment / auto assignment rate and the formulary used to calculate this rate?	This information is located in the Data Library.
17	General			Please provide copies of all correspondence mailed out, reports, satisfaction surveys, provider directories, policies and procedures manual, and training manual	This information is located in the Data Library.
18	General			Please provide statistics from your call center and mailroom as well as statistics around returned mail, number of disenrollment and enrollment transactions, number of system errors, and outreach presentations.	This information is located in the Data Library.
19	General			Will the contractor have access to or be provided with email addresses of case heads?	No, this information is not available.
20	General			Through what networking arrangement does CDHS and affiliates access the current Health Plan Enrollment System? For example, is there direct access over the Internet; or interconnection of Intranets using	Affiliates do not have access to the Health Plan Enrollment System. Therefore, a similar arrangement would not be expected from a new contractor.

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				firewalls? Would a similar arrangement be expected from a new contractor?	
21	General			Does the local enrollment contractor Enrollment Service Representative communicate with beneficiaries in other ways than making presentations and receiving enrollment forms? Specifically, do they communicate with beneficiaries by telephone or email?	The ESR communicates with beneficiaries by telephone. E-mail is presently not an option.
23	General			Are vendors precluded from talking to any particular parties during the proposal development process so procurement policies are not violated?	Proposers may not contact anyone at CDHS during the proposal development process.
24	General			Please confirm that the proposal must be printed single-sided.	In accordance with Section K.2.b.3, of the RFP Main (page 26), all pages must be printed single sided on white bond paper.
25	Data Library			Could the State please provide the most recent twelve months of the PSD-T-P07 Call Center report – providing daily information on incoming calls, abandon rates, length of call, outbound calls and voicemail usage? If possible could this be made available in an electronic Excel spreadsheet?	This information is located in the Data Library.
26				Could the State please provide a breakdown of the daily incoming	Information regarding the Call Center is located in the Data Library. However, the

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				call volume in 15 minute increments throughout the day for a representative month in 2006?	detail that is sought is not available as the current contractor is not required to provide this level of detail in reports.
27				To facilitate IT cost estimation, please provide sizing information about the current operation, e.g., number of: locations, call center personnel, calls per day, documents per day, total active customer accounts, bytes in average document, etc.	This information is located in the Data Library.
28	RFP Main.	A.3	13	How many calls are handled monthly by the call center?	This information is located in the Data Library.
29	RFP Main.	A.3	13	What is the average handle time for a call to the Telephone Call Center (TCC)?	This information is located in the Data Library.
30	RFP Main.	A.3	13	What is the average hold time for callers to the TCC?	This information is located in the Data Library.
31	RFP Main.	A.3	13	Are calls transferred back (forwarded) from the TCC to government offices?	Calls are not currently transferred (forwarded) from the TCC to government offices.
32	RFP Main.	A.3	13	If calls are transferred to government offices, what is the average handling time?	Calls are not currently transferred to government offices; therefore there is no average handling time data that the CDHS can provide to Proposers.
33	RFP Main.	A.3	13	What is the current percentage of calls abandoned?	This information is located in the Data Library.
34	RFP Main	A. 3	9, 13	Does the state expect any of the current County Organized Health System (COHS) counties to convert to the Two-Plan or	The CDHS does not anticipate at this time that any of the current County Organized Health System (COHS) counties will convert to the Two-Plan or Geographic

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				Geographic models? Is there a forecast for the number and volume of participants? What is the mechanism for addressing the additional costs associated with serving these populations?	models.
35	RFP Main	A.3	13	What is the volume of State Fair Hearings and what is the approximate amount of time that the state expects it takes for the vendor to support one of these hearings?	This information is located in the Data Library.
36	RFP Main	Item 4, 9-1	38	In an effort to offer CDHS a complete and compliant response to the comprehensive requirements of the RFP would CDHS consider the following page limit modifications? a. Customer Service Plan 45 from 25 b. Informing Materials 50 from 25 pages c. Enrollment/Disenrollment Processing Compliance Plan 40 from 25 pages d. Quality Management Plan 30 from 25 pages e. Reports 35 from 25 pages f. Security & Confidentiality 30 from 25 pages g. Disaster Prevention &	The page limit will be revised in an addendum.

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				Recovery Plan 40 from 25 pages	
37	RFP Main	A 3 CBP: Call Center	13	The RFP states "The Call Center is a centrally located customer service center." Must that necessarily be a single physical facility? There might be advantages to having multiple locations--to mitigate disaster recovery risk, for example.	Yes, the CDHS prefers the Telephone Call Center to be a centrally located customer service center.
38	RFP Main	A Current Business Process - Informing materials	13	Which languages are presently on the threshold languages list?	The threshold languages that the Contractor will be required to support will be as directed by CDHS.
39	RFP Main	A 3 CBP: Exemption Process	13	Is the contractor responsible to review any of the exemption requests?	The Contractor reviews for administrative approval all exception to plan enrollment request forms received by the Contractor. Some exception to plan enrollment forms require only administrative approval, while others require both an administrative and medical review and approval. The CDHS conducts the medical review and approval process. Further information is available in the Data Library.
40	RFP Main	A Current Business Process - Disenrollment	13	When we say "For each exemption request, the beneficiary, provider, and health plan is notified of the final outcome and MEDS is updated as well," who is responsible for	The Contractor is responsible for notification and MEDS update.

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				notification and MEDS update--the reviewing program?	
41	RFP Main	A 3 CBP: Reports	14	Will the new contractor also need to apply "many processes used to retrieve data from the current enrollment systems?" What systems must be accessed to provide such reports?	Yes, the Contractor will also need to apply 'many processes used to retrieve data from the current enrollment systems'. The systems that must be accessed to provide such reports are dependent upon the information that is being requested.
42	RFP Main	A Current Business Process - Document Management Process	15	What mechanisms are currently used to ensure secure transmission of email such as the MMCD and MDSB beneficiary disenrollment requests? Is email similarly used with "Providers via a medical or non-medical exemption request?" Would other forms of electronic transmission (e.g., website) also be permissible for such requests?	The CDHS requires encryption of all transmissions that contain PHI/confidential information. Some providers do not currently use secure transmission methods. The CDHS is interested in reviewing all proposals for such secure transmission methods.
43	RFP Main	A Current Business Process - Document Management System	15	Are the "multiple locations throughout the State" at a limited set of well-known network locations or must access be provided more broadly, e.g., throughout the Intranet CDHS uses; or from the Internet? How are the current networks integrated and does the state have standards (or preferred mechanisms) for maintaining security across the sites? (such as	No, it is not a limited set of well-known locations. It is up to the Proposer to recommend a process that will make these documents accessible. CDHS has developed the systems to provide for secure communication.

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				IPSEC VPNs etc)	
44	RFP Main	A Current Business Process - Document Management System	15	Who are all the "authorized CDHS and Contractor users"? Do they include more than one contractor? What authentication mechanisms are presently used to secure their access to protected health information (and other data) in the HPE system? How are these users and their credentials (such as passwords) administered today--by CDHS, the incumbent Contractor, or both? Does this process include MMCD and MDSB? How are those users administered?	This information is located in the Data Library.
45	RFP Main	A Current Business Process - Health Plan Enrollment Process	15	Please clarify "available, nonproprietary enabling technologies." By "non-proprietary" do we for example mean not proprietary to the contractor? Or, technologies that comply with de jure or de facto standards? If the latter, what standards?	Available, nonproprietary enabling technologies are those recognized as Commercial Off The Shelf solutions. They can be customized, but not be proprietary to the Contractor.
46	RFP Main	K 3 J 4 a. Work Plan Submission Requirements, Takeover Plan	38	Does the current contractor have a turnover plan and is it available to prospective bidders?	Yes, the current contractor's turnover plan is available to prospective bidders. This information is located in the Data Library.
47	RFP Main	L4a. Cost Proposal Bid Price Forms	50-51	Please provide a template for the "detailed listing of all takeover	The CDHS does not have a template. The CDHS does require that all Takeover costs

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				expenses.”	be identified and then summarized by category (i.e., Facilities, Telephone Call Center, Customer Service, etc.).
49	RFP Main	A.3	10	Would CDHS please clarify the HCO Contractor's responsibility, if any, for tracking participants in a Special Project Plan, as described in RFP Section A.3, paragraph 5?	HCO – NG & PC At the present time, the HCO contractor does not have a responsibility for tracking participants in a Special Project Plan.
50	RFP Main	A.3	13	The RFP states, in Section A.3, in the first paragraph on page 13, that "Programs... are responsible for reviewing the majority of exemption requests." Would CDHS please clarify if there are instances where the Contractor would be determining exemption and if so, please provide specific information on when this would occur?	This information is located in the Data Library.
51	RFP Main	A.3	13	The RFP states, in Section A.3, page 13, in the last paragraph of the "Exemption Process" section, that "...the beneficiary, provider, and health plan is notified of the final outcome and MEDS is updated as well". Would CDHS please clarify if the Contractor is responsible for this notification to the beneficiary, provider, and health plan or is the State responsible for notification and	The Contractor is responsible for the notification of the final outcome to the beneficiary, provider and health plan. The Contractor is responsible for updating MEDS.

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				updating MEDS?	
52	RFP Main	A.3	13	The RFP, Section A.3, page 13, in the last paragraph of the "State Fair Hearings" section, requires the Contractor to support the fair hearing process by providing case information. Would CDHS please clarify what the time-frame requirements are for providing case information for the fair-hearing process?	This information is located in the Data Library.
53	RFP Main	A.3	15	The RFP, Section A.3, page 13, the Section titled "Compliance with the Health Insurance Portability and Accountability Act" discusses the National Provider Identifier (NPI). It is our understanding that under the NPI rulings, many providers may not have to comply with utilization of the NPI on the same schedule as most major health providers. Would CDHS please clarify if the new Contractor will need to make provisions for storing both the NPI and legacy provider numbers?	Yes, the Contractor will need to make provisions for both the NPI and the legacy provider numbers.
54	RFP Main	B	16	The RFP, Section B, Time Schedule table, the date for Notice of Intent to Award Posted is stated as June 28, 2007. However, in RFP, Section P. Bids	The correct date is June 28, 2007. The date on page 95 will be corrected in an addendum.

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				Requirements and Information, paragraph 5, Contracts award and protests, Part .a.2, page 95, the date for the Notice of Intent to Award is July 30, 2007. Would CDHS please clarify the date when CDHS expects to post this notice?	
55	RFP Main	K.2.b.2	26	The RFP, Section K.2.b.2, page 26, requires the use of a font size of not less than 11 points for the narrative portions of the proposal. Is it permissible for Bidders to use a font size of less than 11 points for graphics, charts, tables and Gantt charts as long as readability is not compromised?	Yes
56	RFP Main	K.3.e.2.e and K.3.e.5	29-30	RFP Section K.3.e.2.e, page 29, states that, "Proposers should briefly describe the accounts or work projects managed by the Proposer in the past three years that involved projects similar in nature or closely related to the Scope of Work in this RFP". Section K.3.e.5, on page 30 states that Proposers should "Briefly, describe the accounts or work projects begun and/or completed in the past three years that involved services similar in nature	These sections are seeking the same information and the references will be corrected in an addendum.

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				or closely related to the Scope of Work in this RFP." Would CDHS please clarify the difference in how Bidders should respond to these two sections of the RFP?	
57	RFP Main	K.3.e.3.i	29	Would CDHS please clarify the use of the term "Status of the Proposer" as it relates to RFP Section K.3.e.3.i.?	Status of the Proposer refers to whether the relationship being described is a currently active relationship or was a prior relationship that has since ended.
58	RFP Main	K.3.g	34	This section appears to have two number "1" sub-sections, the first on page 31 "In this section, describe the proposed staffing plan..." and the second on page 34 "Briefly, describe the administrative policies..." In order for us to respond in the correct sequence, please clarify the number sequence for this section?	Correct. The numbering on page 34 will be corrected in an addendum.
59	RFP Main	K.3.j.4.j	41	The RFP, Section K.3.j.4.j, page 41, "Disaster Prevention and Recovery Plan" appears to require the Disaster Prevention and Recovery Plan to be submitted as part of the proposal. Disaster Prevention and Recovery Plans can contain very secure and sensitive information that CDHS and Proposers may not want to become public information through	Confidential information in a Narrative Proposal may be submitted. However, such information will become public information should the bidder's Narrative Proposal be selected and a Contract is entered into.

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				the Public Records Act. Would CDHS consider making this section “confidential” or modifying this requirement so that secure information is not compromised?	
60	RFP Main	K.3.j.4.m	42-43	Does CDHS desire an implementation schedule (i.e., a Gantt chart) as a part of each response for the seven Mandatory Additional Contractual Services?	Yes, the CDHS desires an implementation schedule (i.e., a Gantt chart) as a part of each response for the seven Mandatory Additional Contractual Services.
61	RFP Main	A	11	When the contractor receives an incomplete form, the RFP requests that we mail letters to recipients to request completion. Instead of a letter, will a follow-up call suffice? Also, along with the letter, do we have to mail the recipient the original or a copy of the incomplete form that was received? Or do we send the recipient a new form to complete?	The RFP requires the Contractor's Telephone Call Center to place telephone calls to those beneficiaries who submit incomplete/inaccurate Choice Forms and exception to plan enrollment forms. The original form is to be returned to the recipient along with an Unable to Process letter.
62	RFP Main	D	18	This section states that questions are due by mail or fax by 4:00 pm on January 8, 2007. In the preceding sentence, it says that “proposers are encouraged to submit written inquiries about this RFP to CDHS no later than (2) working days before the Pre-Proposal Conference date so answers can be prepared in	Questions will be allowed until five (5) days after release of the official answers resulting from the Bidder's Conference.

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				advance.” The Pre-Proposal Conference date is January 17, 2007 so this would indicate that questions are due by January 15, 2007 (unless January 15 is a state holiday, which would mean questions are due by January 12, 2007. Can the State clarify the timing for submitting questions?	
63	(1) RFP Main -	Section K.3.d & Section O.1	Page 28 & 64	Please clarify CDHS intent related to the number of pages allowed for the Executive Summary as there is a conflict between Section K.3.d, which states three (3) pages, and Section O.1, which states five (5) pages.	The correct number of pages allowed for the Executive Summary is five (5) pages and will be corrected in an addendum.

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64	RFP Main -	K.3.g.1.e.viii	Page 31	Are these the same position or are they two (2) separate positions?	Yes, these are the same position.
65	RFP Main -	K.3.h.2.a.	Page 35	Please provide an example of what type of staff meet CDHS' definition of support services staff?	The intent of this language is that the Proposer will describe the types of support services that will be provided to support the HCO Program, not the type of staff that will support those services. Examples of support services include the Proposer's administrative, financial or human services departments.

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66	RFP Main -	K.3.l.1.d.	Page 36	Is this requirement intended to reflect all of the work plan requirements described within Section K.3.j.4.? Please clarify correct reference for this section. It would appear "Section K.3.j.4" refers to work plan submission requirements.	Yes, this requirement is intended to reflect all of the work plan requirements described within Section K.3.j.4.
67	RFP Main -	K.3.l.1.e.	Page 36	It appears the reference contained within this requirement is incorrect (Exhibit E, Additional Provisions, Section 40). Please confirm or provide the correct reference which appears to be Exhibit E, Additional Provisions, Section 29 or is it something else?	Correct. The reference on page 36 will be corrected to reference section 29, Financial Criteria, in an addendum.

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68	RFP Main -	K.3.j.4.e / N.7.e	Page 40 & 83	The Quality Management Program evaluation criteria/questions has points associated with "Medi-Cal Publications Quality Assurance". Is it CDHS intent for the Contractor to provide a response in the Quality Management Plan work plan section contained on Page 40? If yes, please add Medi-Cal Publications as a required response in Section K.3.j.4.e (i-vii).	Yes, CDHS intends for the Contractor to provide a response in the Quality Management Plan work plan section contained on Page 40. CDHS will add Medi-Cal publications as a required response in Section K.3.j.4.e (i-vii).
69	RFP Main -	Section L.4.e	Page 53	What specific resources/materials/activities fall under Medi-Cal Publications Management Services?	The Scope of Work for this bid price appears in Exhibit A, Attachment II, Section 2.9.

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70	RFP Main -	O.7.a	Page 70	The evaluation criteria for Takeover contains multiple references to K.3.j.5..., however K.3.j only goes to "4", what is the correct references in this section.	The references will be corrected in an addendum.
71	RFP, Attachment 16-2	Entire Price Form	1	For the Enrollment/Disenrollment Transactions Price Form, would CDHS please clarify the calculation used to determine the "Transaction Range in Level"? It appears that the "Maximum" column minus the "Minimum" column should equal the "Transaction Range in Level" column, however we have not been able to verify this calculation is used for every row.	Attachment 16-2 has some calculation errors and will be corrected in an addendum.

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72	RFP, Attachment 16-3	Entire Price Form	1	For the HCO Informing Packet Mailings Price Form, would CDHS please clarify the calculation used to determine the "Transaction Range in Level"? It appears that the "Maximum" column minus the "Minimum" column should equal the "Transaction Range in Level" column, however we have not been able to verify this calculation is used for every row.	Attachment 16-3 has some calculation errors and will be corrected in an addendum.
73	RFP, Attachment 16-4	Entire Price Form	1	For the Telephone Call Center Price Form, would CDHS please clarify the calculation used to determine the "Transaction Range in Level"? It appears that the "Maximum" column minus the "Minimum" column should equal the "Transaction Range in Level" column, however we have not been able to verify this calculation is used for every row.	Attachment 16-4 has some calculation errors and will be corrected in an addendum.
74	Exhibit A, Attachment II, Operations	1.4	1-2	Would CDHS please clarify if the usage of all existing toll-free telephone numbers for the current HCO program will be transferred to the new Contractor upon Assumption of Operations?	As a vectoring system will be used in the new Contract's Telephone Call Center, only those existing toll-free telephone numbers used by the current HCO program that are necessary to operate the vectoring system will be transferred to the new Contractor.
75	Exhibit A, Attachment II	1.4	1-2	It is our understanding that calls from pay phones to a toll free	Proposers do not need to estimate costs for toll-free telephone charges related to pay

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	Operations			number can result in a higher toll charge to the Contractor. Please provide data or an estimate of the percentage of calls that come from pay phones in order for Bidders to correctly estimate costs.	phone because all toll-free charges will be cost reimbursed in accordance with Exhibit B, Attachment 1, Section 1.14.1.6.
76	Exhibit A, Attachment II, Operations	1.4	1-2	Does the HCO Program perform on-line transfers to other referral numbers, such as Healthy Families?	No, currently the HCO Program does not perform on-line transfers to other referral numbers, such as Health Families.
77	Exhibit A, Attachment II, Operations	1.4	1-2	Would CDHS please provide historical data for the past 12 months on call volume details broken down by day of the week, by 1/2 hour increments, busy hour reports, and call splits between languages? This information is not currently available in the Data Library and would be very beneficial for design and estimating costs.	The reports received from the current contractor do not provide this level of detail.
78	Exhibit A, Attachment II, Operations	1.4	1-2	The Data Library has information on the Length of Call in the TCC reports, however it is unknown if the Length of Call in the TCC reports addresses the Average Handle Time or the Average Talk Time. Would CDHS provide clarification on whether Length of Call represents the Average Handle Time or the Average Talk	The reports received from the currently contractor do not provide this level of detail.

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				Time?	
79	Exhibit A, Attachment II, Operations	1.4	1-2	Would CDHS please provide information on the average monthly call volume for TDD usage, by language?	The reports currently received from the contractor do not provide this level of detail.
80	Exhibit A, Attachment II, Operations	1.4.1.B	1-3	Would CDHS please provide the estimated average and peak call volumes for each call type described in 1.4.1.B so Bidders can design and cost the IVR components?	The reports currently received from the contractor do not provide this level of detail.
81	Exhibit A, Attachment II, Operations	1.4.1.C	1-3	Exhibit A, Attachment II, Section 1.4.1.C states that "Applicants/beneficiaries shall have the ability to access the tracking process through a 'ticket' which has multiple channels in order to receive assistance with their enrollment". Would CDHS please provide further definition on what the CDHS views as the "ticket"?	The definition shall be added to the Glossary in an addendum.
82	Exhibit A, Attachment II, Operations	1.4.3.Q	1-8	This Section requires the Contractor to implement temporary phone messages upon request by CDHS. Would CDHS please clarify if these phone messages are required to be in all of the threshold languages?	The temporary telephone messages referenced in this section are required to be provided only in English.
83	Exhibit A, Attachment II,	1.5	1-9	In order for Bidders to accurately respond to the RFP, would CDHS	This information must come from Eligibility Branch and is not readily available. It will be

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	Operations			please provide the percentage of eligible beneficiaries that apply for Medi-Cal in person at presentation or outreach sites and the percentage that enroll using mail-in applications?	requested and researched during the term of the new Contract.
84	Exhibit A, Attachment II, Operations	1.5.1.2	1-10	In order for Bidders to accurately respond to the RFP, would CDHS please provide what percentage of eligible beneficiaries attend a presentation, by site and by language?	Although the information is not based on percentage of total eligibles, there is much information on the population that attends presentations. This information must come from Eligibility Branch and is not readily available. It will be requested and researched during the term of the new Contract.
85	Exhibit A, Attachment II, Operations	2.5.3	2-8	In order to correctly estimate the staffing needed to process incoming enrollments, would CDHS please clarify that the requirement in Exhibit A, Attachment II, Section 2.5.3, page 2-8 means that every beneficiary (whether currently enrolled or pending enrollment) will receive a new Informing Packet?	No, depending on the situation, not every beneficiary will be mailed a new informing packet. Sometimes, the directive will be to send a simple letter. CDHS would provide specific direction regarding the affected population and materials to be used.
86	Exhibit A, Attachment II, Operations	2.5.4	2-8	Exhibit A, Attachment II, Section 2.5.2.B (last paragraph) states if a beneficiary has a choice form on file (received within 120 days) they should not be sent an informing packet. Would CDHS please clarify if these beneficiaries should	Yes, if a beneficiary has a complete and accurate Choice Form on file which was received within the last 120 days, and Medi-Cal eligibility has been confirmed, only a Health Plan Membership Status letter is to be mailed.

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				automatically be sent a confirmation letter instead?	
87	Exhibit A, Attachment II, Operations	2.9.2.A	2-18	Does CDHS intend for the Contractor to accept delivery and assume physical control of Medi-Cal publications 2 weeks prior to Assumption of Operations, as stated in Exhibit A, Attachment I, Section 1.11.3.B, Page 1-25, rather than at Contract Effective Date, as stated in Exhibit A, Attachment II, Section 2.9.3.A, page 2-18.?	CDHS intends for the Contractor to accept delivery and assume physical control of the Medi-Cal publications two (2) weeks prior to Assumption of Operations, as stated in Exhibit A, Attachment I, Section 1.11.3.B. CDHS will revise Exhibit A, Attachment II, Section 2.9.3.A as follows: “The Contractor shall, <i>prior to the</i> upon Assumption of Operations...”
88	Exhibit A, Attachment II, Operations	2.9.3.B	2-18	In order to correctly estimate space requirements, would CDHS please provide the average storage volumes of the Medi-Cal forms/booklets that the Contractor will be expected to house?	Historical storage volumes (in units) are listed as follows: MC 210: 50,000 – 500,000 MC 321: 50,000 – 500,000 PUB 68: 75,000 – 750,000 PUB 406: 15,000 – 125,000 Handbook: 250,000 – 1,250,000 The volumes of additional future publications are unknown.
89	Exhibit A, Attachment II, Operations	2.9.4.5	2-20	For cost purposes, would the CDHS please provide the average annual number of focus group testing sessions that the Contractor should expect to facilitate?	Expected number of sessions per Focus Group Research Plan (as defined in 2.9.4.5.C) are 18 – 32 sessions.
90	Exhibit A, Attachment II, Operations	2.9.11	2-25	Can CDHS please provide information on the average number, by type, of Medi-Cal	Historical number of publications mailed to individual requestors (as defined in 2.9.11.B.1) per month are as follows:

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#	RFP Reference	RFP Section	Pg #	Question/Comments	Responses
				publications mailed to individual requestors per month?	MC 210: 25 – 300 MC 321: 50 – 600 PUB 68: 50 – 600 PUB 406: 10 – 100 Handbook: 50 – 600 The number of additional future publications are unknown.
91	Exhibit A, Attachment II, Operations	3.0	3-1	Would CDHS please provide the average number of new eligible beneficiaries in each county sent on the daily MEDS file, in order to provide Bidders with accurate information for staffing/costing?	This information is located in the Data Library.
92	Exhibit A, Attachment II, Operations	3.7.1.E	3-3	This section requires the Contractors e-mail system to be compatible with the CDHS e-mail system in order to provide unrestricted, unimpeded mail communication between CDHS and Contractor personnel. Would CDHS please specify the e-mail system platform that is used by CDHS and define what “unrestricted” and “unimpeded” means in the context of this requirement? (i.e., POP and SMTP standard interfaces or attachment file size or Spam filters or security parameters or encoding such as plain text or HTML, etc.)	The CDHS uses Microsoft Exchange 2003. The intent of this site is that the CDHS and Contractor be able to seamlessly exchange information using email.

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93	Exhibit A, Attachment II, Operations	3.7.2	3-3	Would CDHS please provide file formats (data layouts) to Bidders for MEDS data incoming and outgoing files?	This information is located in the Data Library.
94	Exhibit A, Attachment II, Operations	3.11.2	3-7	Would CDHS please provide further description of the process inquires that fall within the 3-second response time requirement noted in Exhibit A, Attachment II, Section 3.11.2, page 3-7?	The process inquiries that fall within the 3-second response time are any type of inquiry for information from the Enrollment/Disenrollment Process.
95	Exhibit A, Attachment II, Operations	3.18.2	3-27	In order for Bidders to estimate costs, would CDHS please provide information on the average receipt volume per week/month of Special Disenrollment Request Forms?	This information is located in the Data Library.
96	Exhibit A, Attachment II, Operations	4.4.B	4-2	In Exhibit A, Attachment II, 4.4.B, it states that the Contractor shall establish a QMP "... assuring that all enrollment and disenrollment requests are promptly and accurately fulfilled...". The use of the word "all" could infer that 100% of transactions will be monitored. Would CDHS please verify that statistically valid samples should be used to measure the compliance with Contractual requirements?	Statistically valid, random samples shall be used to measure the compliance with contractual requirements. However, the Contract requirement that all enrollment and disenrollment requests be promptly and accurately fulfilled allows the CDHS to enact the precedent-to-payment provisions of the Contract if the requirement is not fulfilled. The CDHS will monitor the requests as well, and the Contractor is required to report the fulfillment rate for all enrollment and disenrollment requests, per the Report Section of the Contract.
97	Exhibit A,	6.4.E	6-2	Would CDHS please provide	This information is located in the Data

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	Attachment II, Operations			access to the current Report User Manual(s) (RUM), which we understand covers all HCO report deliverables?	Library.
98	Exhibit A, Attachment II, Operations	7.5.K	7-4	In order to accurately estimate Takeover storage costs, would CDHS please provide information to Bidders on what portion of the current Contractor's paper records (volume in boxes or current storage square footage) will be transferred to the new Contractor upon Assumption of Operations?	The current contract language allows the current contractor to convert hard copy documents into electronic format ninety (90) calendar days after receipt of same. Therefore, it is anticipated that a total estimated pallet count that will be transferred to the new Contractor of hard copy documents will be approximately 1046. Pallets measure 40 inches by 48 inches.
99	Exhibit A, Attachment II, Operations	10.17.3.G	10-15	In Exhibit A, Attachment II, Section 10.17.3.G, page 10-15, the Contractor has the responsibility for reporting on the "...impact of edit and pricing changes...." in the report on Integrated Test System. Would CDHS please clarify what pricing changes are being requested here?	Exhibit A, Attachment II, Section 10.17.3.G was inadvertently included and will be removed in an addendum.
100	Exhibit A, Attachment II	1.5.1 Presentation Sites	Page 1-10	Please provide a list of current presentation sites.	This information is located in the Data Library.
101	Exhibit A, Attachment II	1.4	8	Do we need to link faxes to beneficiaries since, in many cases, the fax number provided will not be part of the beneficiaries'	No, the Contractor will not be required to link faxes to beneficiaries.

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				demographic information collected?	
102	Exhibit A, Attachment II	1.4	10	Are all calls where caller ID is blocked exempt from call back criteria?	Yes, all calls in which caller ID is blocked will be exempt from call-back criteria. The Contractor shall provide evidence of such ID blocking in reports as required in the Reports Section of the Contract.
103	Exhibit A, Attachment II -	1.4.3.H	13	Is CDHS open to staffing models that would illustrate the cost savings vs. the one outlined that only allows one call per TCC staff member in queue at any given time?	Yes, CDHS is willing to review staffing models that would illustrate such cost savings.
104	Exhibit A , Attachment II	1.5.22	16	Are there any preferred geographic locations where the three regional managers need to be housed?	There is no specific requirement in the RFP regarding where the 3 regional managers will be housed. It is assumed that CDHS will be consulted regarding locations.
105	Exhibit A, Attachment II	1.7	29	The RFP states that the "Site Locator and Universal Locator are property of CDHS." Is this true if the Proposer develops a custom application in a proprietary platform?	The RFP language states that if an automated system/platform is bid and accepted as part of the Contract, It cannot be proprietary.
106	Exhibit A, Attachment II	2.4.2	33	What is an estimate of the number and length of materials outlined in the RFP?	<p>The number of different materials and complexity of each type of material that require changes as the result of "specific projects" is too varied to satisfactorily answer this question.</p> <p>The number and complexity of changes to existing informing materials varies greatly.</p>

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					<p>The majority of changes are relatively straight- forward but the process can become complex due to the mandated number of HCO counties and packet types. The development of a completely new material is relatively infrequent but does occur.</p> <p>Examples of materials and trend data for the revisions to materials can be found in the Data Library.</p>
107	Exhibit A, Attachment II	2.9.1.2	53	Will the state allow contractor to use a third party located in California to store and distribute program related materials?	Yes, the Contractor may use a third party/subcontractor located in California to store and distribute Medi-Cal Publications.
108	Exhibit A, Attachment II	4.2	89	If the vendor is not currently ISO certified, will CDHS allow certification to occur in first 180 days of program operation?	The CDHS will allow the Contractor and/or subcontractors to become ISO certified within the first one-hundred eighty (180) calendar days after the Contract Effective Date.
109	Exhibit A, Attachment II	6.8	26	Can the contractor determine the format that information will be distributed to Manage Care Plans with CDHS' approval?	Yes, the Contractor may propose a format but final approval will be made by CDHS and the Manage Care Plans.
110	Exhibit A, Attachment II	Section 1.4.1.C.2	Customer Service 1-2	Will returned calls resulting in successful contact with a beneficiary be subtracted from the total number of abandoned calls for reporting and compliant purposes related to the abandonment rate?	Yes, if the abandoned call can be traced and linked to the successful contact with the beneficiary, the returned call can then be subtracted from the total number of abandoned calls for reporting and compliance purposes as they relate to the abandonment rate. The language will be

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					revised in an addendum.
111	Exhibit A , Attachment II -	Section 1.4.1.C.3	Customer Service 1-2	Is it CDHS intent that the 'voice mail calls returned' performance standard should be negatively impacted by caller-initiated automated call backs? This would appear to dis-incentivize the Contractor from encouraging the use of this feature for the benefit of callers. Please consider modifying this portion of the requirement so the Contractor can focus on a feature rich solution without penalty.	When the RFP was written, it was CDHS intention that callers will not be aware of the caller-initiated automated call back feature when they are offered the option to leave a voice mail message.
112	Exhibit A, Attachment II	Section 1.4.1.A.3	Customer Service 1-5	In the current MEDS environment, the functionality required to meet the automated lookup into MEDS is not possible. In order for this to be possible, ITSD would need to allow an ODBC or equivalent connection into MEDS. Please clarify if this functionality will be provided to the Contractor so vendors may propose an automated solution?	This functionality will not be provided to the Contractor. The language will be changed in an addendum.
113	Exhibit A, Attachment II -	Sections 2.4.3.A & 2.4.3.B	Informing Materials 2-4	For existing HCO informing materials, will the readability requirement in SOW 2.4.3.A , and the unbiased, culturally sensitive, linguistically appropriate, and error-free requirements in SOW	The Contractor will not be responsible for assuring reading levels of currently used materials until written instructions to update said materials are received from the CDHS.

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				2.4.3.B only be enforced upon the implementation of the Informing Materials ACS, given that existing materials do not meet these requirements, while the ACS is designed to achieve this goal?	
114	Exhibit A, Attachment II -	Section 2.4.4	Informing Materials 2-4	Are the HCO informing materials contained within the data library mandated for bidding the contract as they are presented without alteration and construction at the Assumption of Operations?	Yes, Section 2.2.4 does not imply that any changes to currently used informing materials will be required at the Assumption of Operations.
115	Exhibit A, Attachment II -	Section 2.5.1 [paragraph 1]	Informing Materials 2-6	Are there are any examples for any mailings occurring within 3 days. Is it CDHS intent that the requirement to mail HCO Informing Materials within three (3) business days of receipt of a C-letter supersede the work plan, SDN, and materials development timelines related to mailings? It appears the intent is for the Contractor to start mailings within three (3) business days of CDHS approval of revised materials, translations, approved system changes, etc., however the language in this section does not make CDHS intent clear, please clarify.	The language will be revised in an addendum as follows: : “The Contractor is required to mail HCO informing materials within three (3) business days of receipt of the daily eligibles file from MEDS and the monthly reconciliation files from MEDS.”
116	Exhibit A,	Section 2.5.B	Informing	In an effort to provide a fully	This section dictates the Contractor will use

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	Attachment II -		Materials 2-6	compliant response, please provide CDHS understanding of what is intended for an "address and telephone locator service". This requirement is unclear in the context of the other contract requirements related to placing calls to beneficiaries for address information in combination with the requirements to engage to the USPS for forwarding address information.	any available resources to identify and correct beneficiary address and phone number.
117	Exhibit A, Attachment II -	Sections 2.5.5.C & 2.5.5.D	Informing Materials 2-8	Will Annual Renotification notices mailed to beneficiaries not enrolled in a managed care plan on their anniversary date as described in Section 2.5.5.D, only apply to mandatory beneficiaries? If yes, there is a potential conflict, as notices for voluntary beneficiaries, as described in Section 2.5.5.C, state that mailings to the voluntary population should be mailed sixty days prior to their anniversary date. Please advise if the Contractor should establish separate mailing and selection criteria to address these different requirements?	The requirement to mail Annual Renotification notices applies to both mandatory and voluntary beneficiaries, whether they are enrolled in a managed care plan or not.
118	Exhibit A,	Section 2.5.5.D	Informing	Should Annual Renotification	Annual Renotification notices shall be

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	Attachment II -		Materials 2-8	notices be evaluated at the beneficiary level instead of at the case level, since not all beneficiaries within a case will have the same enrollment or eligibility date?	evaluated at the 'case head level' as stated in Section 2.5.5.D, which should be interpreted to equal "case level."
119	Exhibit A, Attachment II -	Section 2.5.5	Informing Materials 2-8	Please confirm that Annual Renotification mailings will include the HCO Consumer Guide.	Currently the Consumer Guide is included in the annual renotification mailings (RLM).
120	Exhibit A, Attachment II -	Section 2.5.7	Informing Materials 2-9	Section 1.14.1.4 provides instructions for reimbursement for Special Mailings, however is silent related to how "Mass Mailings" will be reimbursed. Please clarify the distinction between Special Mailings and Mass Mailings and describe what reimbursement mechanism will be provided for Mass Mailings.	<p>Exhibit A, Attachment II, Section 2.5.7 should read: Mass-mailing and special mailing projects result from a variety of activities including, but not limited to:</p> <p>Exhibit B, Attachment I, Section 1.14.1.4 should read: MASS-MAILINGS AND SPECIAL MAILINGS</p> <p>The Contractor shall be reimbursed for the direct costs paid for mass-mailings and special mailings. These mailings...</p> <p>The language will be revised in an addendum.</p>
121	Exhibit A - Attachment II -	Section 2.5.9	Informing Materials 2-11	Please confirm our understanding that Section 1.14.1.2, Printing, will be the reimbursement mechanism that the Contractor should use for packaging expenses (boxes, separator sheets, labels, tape,	<p>Exhibit B, Attachment I, Section 1.14.1.1 should read: E. Packaging materials used to mail or ship the materials identified in Exhibit A, Attachment II, Section 2.5.9.</p> <p>The language will be revised in an</p>

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				etc.) related to shipping Other HCO Informing Materials to outreach sites, health plans, and other CDHS designated facilities/entities? If not, please indicate what section these costs will be reimbursed.	addendum.
122	Exhibit A - Attachment II -	Sections 2.5.10.D & 2.5.10.E	Informing Materials 2-11	If the Contractor submits a cost savings initiative as required in Section 2.5.10.E, does the Contractor share the savings per Exhibit E, Section 24?	Yes, as long as the savings is not due to a USPS rate change. Please refer to Exhibit E, Section 24.K.4.
123	Exhibit A - Attachment II -	Sections 2.6.E & 2.6.M	Informing Materials 2-12	May the Contractor utilize updated addresses for all future mailings or only for the first mailing after an updated address is received?	Use all the tools to determine correct addresses, knowing that unless MEDS has been updated by the county, the correct address will only be good until the next monthly MEDS reconciliation (a maximum of 1 month).
124	Exhibit A - Attachment II -	Section 2.6.I	Informing Materials 2-13	Since images of all informing material mailings will be available online to Contractor staff as well as CDHS staff, will CDHS allow the Contractor to meet this requirement by scanning a barcode contained on the returned material and have it linked to an example of the specific type of informing material mailed? This will allow CDHS and Contractor staff to reference the material mailed while keeping costs down	The CDHS will allow the scanning of a barcode, if one is utilized on HCO Informing Materials. The language will be revised in an addendum.

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				for resources required for disassembling and scanning each piece of returned mail especially the contents returned in an informing booklet that includes the cover, cover letter and enrollment form which all have identifying information.	
125	Exhibit A - Attachment II -	Sections 2.6 (G, I, and L)	Informing Materials 2-13	If CDHS confirms its intent to require scanned images of undeliverable returned mail, there is a record retention conflict that needs to be clarified. Exhibit A - Attachment II, Section 7.5.B requires the Contractor to maintain all original HCO Program records for a minimum period of forty-five (45) calendar days, however Exhibit A - Attachment II, Sections 2.6 (G, I, and L) requires the Contractor to shred these materials within one (1) business day from the date of receipt. Please provide direction related to this conflict.	Exhibit A - Attachment II, Section 7.5.B which requires the Contractor to maintain all original HCO Program records for a minimum period of forty-five (45) calendar days does not apply to the requirement of Exhibit A - Attachment II, Sections 2.6 (G, I, and L) which requires the Contractor to shred these materials within one (1) business day from the date of receipt. The language will be revised in an addendum.
126	Exhibit A - Attachment II -	Section 2.7.3.B.6	Informing Materials 2-16	Can the requirement be tied only to maintaining an appropriate inventory stock? The requirements listed in 2.7.3.B for provider directory production and storage may be too restrictive for CDHS	CDHS agrees with the suggested change. The addendum should remove the sentences "Insert inventories shall meet the same stocking requirements as Provider Directories. These requirements are described above in Section 2.7.3.B The

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				related to provider directory inserts, since provider inserts are usually produced on an ad hoc basis for short period of times meaning a requirement to store a 90 business day supply may not be cost efficient. We recommend this requirement be clarified for provider directory inserts to produce the supply required by CDHS with reporting requirements linked to CDHS needs instead of tied to a 45 day resupply. Will the Contractor be responsible for ordering and storing a 90 business day supply of provider directory inserts?	language will be revised in an addendum.
127	Exhibit A - Attachment II -	Section 2.9.3.B	Informing Materials 2-18	Please confirm our understanding that the definition of "Medi-Cal Publications", of which the Contractor has development, printing, storage, and distribution responsibility, are the six (6) items identified in Section 2.9.3.B?	The six (6) items identified in Exhibit A, Attachment II, Section 2.9.3.B are a list of the publications for which the Contractor has distribution responsibility.
128	Exhibit A - Attachment II -	Section 2.9.5.A	Informing Materials 2-21	When is the Print Specification Schedule in SOW 2.9.5.A required to be submitted to CDHS; will there be one schedule for each unique publication; and what information will CDHS provide to the Contractor to assist in the	The Print Specification Schedule in Exhibit A, Attachment II, Section 2.9.5.A is considered the first step in Exhibit A, Attachment II, Section 2.9.6. Within five (5) business days of receiving CDHS direction to provide a printing service, the Contractor shall submit a Printing Specification

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				schedule's development process?	Schedule (project work plan) to the CDHS.
129	Exhibit A - Attachment II -	Section 2.9.11	Informing Materials 2-25	Please confirm our understanding that Section 1.14.1.18.A, Medi-Cal Publications, will be the reimbursement mechanism that the Contractor should use for packaging expenses (boxes, separator sheets, labels, tape, etc.) related to shipping Medi-Cal Publications to individuals, outreach sites, health plans, and other CDHS designated facilities/entities?	The cost reimbursement category defined in Exhibit B, Section 1.14.1.18.B, is for the CDHS to reimburse the Contractor for the actual costs incurred by the Contractor in the course of completing Medi-Cal Publication distribution functions. This includes shipping-related packaging expenses.
130	Exhibit A - Attachment II -	Section 2.9.11	Informing Materials 2-25	Since CDHS controls the amount of materials that may be purchased and stored by the Contractor, will CDHS provide an extension of the timeliness requirement to fulfill Medi-Cal Publication orders if the ordered quantity exceeds inventory on hand?	The Contractor's inventory control methods should reduce the possibility that a customer's order will exceed the number of publications on-hand. CDHS would grant an extension to the timeliness requirements on a case-by-case basis in the event the ordered quantity exceeds inventory on hand.
131	Exhibit A - Attachment II -	Section 2.9.11	Informing Materials 2-25	To assist in fully understanding this requirement, please clarify if CDHS will require approval of all orders for Medi-Cal publications, received through the various communication channels, prior to delivery by the Contractor? If CDHS approval is required will the timeliness requirements be tied to	CDHS will approve the Contractor's proposed method to receive orders. This is a one-time event at the initiation of the contract. Once the method is approved, CDHS will not need to approve each order that is received by customers.

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				CDHS approval in place of receipt of the request?	
132	Exhibit A - Attachment II -	Section 2.9.11.B	Informing Materials 2-25	It appears Section 2.9.11.B.4 is either missing or was intentionally omitted, in which case 2.9.11.B.5 should be renamed to 2.9.11.B.4.? Please advise.	Correct. CDHS will rename 2.9.11.B.5 to 2.9.11.B.4 in an addendum.
133	Exhibit A - Attachment II -	Section 2.9.4.1	Informing Materials 2-19	To ensure vendors appropriately address CDHS' increased emphasis on Medi-Cal Publications, could CDHS provide historical and/or projected data related to the number of times Medi-Cal publications have been and/or will be revised by publication type on a monthly and yearly basis?	The expected frequency of design services is unknown as this is based on external events. However, it is known that CDHS performs minor edits annually to each of the publications. Historically, new photographs, logos, and re-design services are not needed every year.
134	Exhibit A - Attachment II -	Section 2.9.11.B.1	Informing Materials 2-25	Will the Contractor be responsible for shipping other collateral material along with those Medi-Cal Publications shipped to individual residences? Will cover letters, additional informing materials, etc. be included, i.e. similar to informing material packets, or will this responsibility be limited only to bulk type delivery of materials?	The shipments to individual residences (as described in Exhibit A, Attachment II, Section 2.9.11.B.1) are intended as bulk type delivery of materials and will not require cover letters or other informing materials.
135	Exhibit A - Attachment II -	Sections 3.18.1.B & 3.18.1.C	Enrollment Disenrollment Processing 3-23	Please clarify CDHS' intent for the requirements in Sections 3.18.1.B and 3.18.1.C be consecutive or concurrent?	The CDHS intent is that the requirements in Sections 3.18.1.B and 3.18.1.C will be concurrent.

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136	Exhibit A - Attachment II -	Sections 3.18.1.B & 3.18.1.C.1.a.1	Enrollment Disenrollment Processing 3-23	Is it CDHS intent for the following requirements to be consecutive or concurrent as described in Section 3.18.1.B and Section 3.18.1.C.1.a.1?	The CDHS intent is that the requirements will be concurrent. However, the language has been changed allow two (2) business days to place the Choice Form in 'pend' status. The language will be revised in an addendum.
137	Exhibit A - Attachment II -	Section 3.18.1.C.1.c	Enrollment Disenrollment Processing 3-23	Please substantiate the reference to Section 3.5.1.D is incorrect, and the correct reference is '3.18.1.C.2.	The correct reference is 3.21.1.C.2. The language will be revised in an addendum.
138	Exhibit A - Attachment II -	Section 3.18.1.C.2.c	Enrollment Disenrollment Processing 3-25	Please substantiate the reference to Section 3.5.1.D is incorrect, and the correct reference is 3.18.1.C.2.?	The correct reference is 3.21.1.C.1. The language will be revised in an addendum.
139	Exhibit A - Attachment II -	Section 3.18.1.C.2.f	Enrollment Disenrollment Processing 3-26	Please substantiate the reference to Section 3.5.1.C.2.d is incorrect, and the correct reference is 3.18.1.C.2?	The correct references are 3.21.1.A, B, and C, and 3.21.1C.1. The language will be revised in an addendum.
140	Exhibit A - Attachment II -	Section 3.18.2.B.3	Enrollment Disenrollment Processing 3-28	Please explain CDHS intent for requiring the Contractor to place Special Disenrollment requests into a pend status for 30 days. Is there an advantage to processing as described above since the Contractor would be required to process the returned Special Disenrollment form if it is received after day 30 regardless of the pend status, please clarify?	The requirement to place the request in pend status for thirty (30) calendar days offers the Contractor the ability to not have these requests in their active process for an indefinite period of time awaiting action.
141	Exhibit A - Attachment II -	Section 3.18.2.B.3	Enrollment Disenrollment	Could CDHS further explain whether the intent for the actions	Yes, the two (2) business days of receipt language includes the one (1) business day

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			Processing 3-28	specified in this requirement are as follows, "...Within two (2) business days of receipt...", includes one (1) business day to assign a DCN and one (1) business day to record the incomplete/inaccurate data into the beneficiary's record?	to assign a DCN and one (1) business day to record the incomplete/inaccurate data into the beneficiary's record.
142	Exhibit A - Attachment II	Section 3.18.2.B.3	Enrollment Disenrollment Processing 3-28	Please substantiate the reference to Section 3.18.2.C is incorrect, and the correct reference is 3.18.2.D?	The correct section reference is 3.21.1.D. The language will be revised in an addendum.
143	Exhibit A - Attachment II -	Section 3.18.2.C	Enrollment Disenrollment Processing 3-28	Would CDHS provide confirmation that Contract Reference 3.5.1.2.1.b is incorrect and the correct reference, should be 3.18.2.B?	The correct reference is 3.21.2.B.1. The language will be revised in an addendum.
144	Exhibit A - Attachment II -	Section 3.18.3.B	Enrollment Disenrollment Processing 3-29	Is the "disposition" after CDHS approval/denial or is this the status of the form at the end of business day one (1), for example: incomplete, sent to DHS for medical review, and etc.? If disposition is intended to be after CDHS approval/denial then this timeliness requirement conflicts with contract reference 3.18.3.C.a which states that the Contractor shall Process each medical exception to plan enrollment request form within three (3)	The disposition is the status of the form one (1) business day after assigning the form a DCN.

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				business days of receipt of the form at the Contractor's main operating facility.	
145	Exhibit A - Attachment II -	Section 3.18.3.C	Enrollment Disenrollment Processing 3-29	Please clarify the reasonable requirement given sub-requirements in Sections 3.18.3.C, 3.18.3.C.1.a, and 3.18.3.C.1.b. Section 3.18.3.C states the Contractor has two (2) business days to review the forms for completeness and accuracy, while Section 3.18.3.C.1.a states the Contractor has three (3) business days to process the form. This is then followed with the requirement in 3.18.3.C.1.b which requires the Contractor to submit the form to CDHS for review and approval with two (2) business days. Is this a conflict or is it CDHS intention that the Contractor will have two (2) business days to process the form with CDHS' review being completed during day three (3), followed by the Contractor being responsible for updating their system of the status of CDHS approval/denial? Is there a timeframe associated with the Contractor updating the system since CDHS review and	The Contractor shall have three (3) business days within which to meet all of the Contract requirements for processing exemption to plan enrollment forms. If, during the three (3) business days, the form must be submitted to CDHS for review, the time frame requirement is suspended until such time as the form is again received from CDHS with either an approval or denial status. The time frame requirement begins again at the day count the Contractor was at upon release of the form to CDHS. For example, if the Contractor were to process an exception to plan enrollment form during business days one (1) and two (2), then sends the form to CDHS for review and receives the reviewed form five (5) business days later, the Contractor has one (1) business day in which to complete processing of the form in order to meet Contract requirements, that of three (3) business days for the entire process.

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				approval/denial may take more than one (1) business day? Please clarify.	
146	Exhibit A - Attachment II -	Section 3.18.3.C.3.b	Enrollment Disenrollment Processing 3- 29	Will the Contractor be exempted from the requirement to place phone calls for those forms that are determined to be incomplete due to lack of signature? The Contractor will be allowed to directly send the form back with an incomplete letter?	The Contractor will be exempted from the requirements to place telephone calls for those forms determined to be incomplete due to lack of signatures. The Contractor will be allowed to directly send the form back with an Unable to Process letter. The language will be revised in an addendum.
147	Exhibit A - Attachment II -	Section 3.18.3.C.3.b	Enrollment Disenrollment Processing 3- 29	Will the Contractor be allowed to make changes to the form from information received from the beneficiary or submitting entity over the phone? Will the Contractor be allowed to consider the form complete for processing based solely on updates received verbally, assuming the form contains a signature?	The Contractor will be allowed to make changes to the form from information received from the beneficiary or submitting entity over the phone. The Contractor will be allowed to consider the form complete for processing based solely on updates received verbally, assuming the form contains a signature, and only if the verbal conversation with the beneficiary or head of household has been recorded both verbally and in writing, and the verification of the authority and authenticity of the caller has been established. The language will be revised in an addendum.
148	Exhibit A - Attachment II -	Section 3.18.3.D	Enrollment Disenrollment Processing 3-	Would CDHS provide confirmation that the reference in Section 3.18.3.D to Section 3.5.3.C.1.a is	Correct, the reference on page 3-31 will be revised to correctly reference 3.21.3.C.1.a in an addendum.

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			29	incorrect, and it should be Section 3.18.3.C.1.a.?	
149	Exhibit A - Attachment II -	Section 3.18.3.E	Enrollment Disenrollment Processing 3-29	Would CDHS provide confirmation that the reference in Section 3.18.3.E to Section 3.5.3.C is incorrect, and it should be Section 3.18.3.C.?	The correct reference is Section 3.21.1.D. The language will be revised in an addendum.
150	Exhibit A - Attachment II -	Sections 6.5.2.3, 6.5.2.4, 6.9.2, & 6.9.3	Reports 6-18 & Reports 6-27	The requirements for Trouble Reporting Procedures and Reports & Balancing Procedures and Reports from page 6-18 are repeated on page 6-27. Please clarify if the Trouble Reporting and Balancing procedures apply to all report deliverables?	Section 6.5.2.3 Trouble Reporting Procedures and Reports & Balancing Procedures and Reports applies even if an automated system is proposed and accepted as a part of this Contract. Section 6.9.2 applies if an automated system is proposed and accepted as a part of this Contract.
151	Exhibit A - Attachment II -	Sections 7.5 b & 7.10.1.C	Records Retention and Retrieval 7-2 & Records Retention and Retrieval 7-8	Section 7.5.b states that original HCO Program records shall be kept for a minimum of forty-five (45) calendar days, however Section 7.10.1.C indicates a minimum of ninety (90) calendar days. What is the desired timeframe?	Section 7.5.b shall be revised to read ninety (90) calendar days. The language will be revised in an addendum.
152	Exhibit A - Attachment II -	Section 7.5.K	Records Retention and Retrieval 7-4	Will the Contractor have the authority to destroy all HCO Program records that are not "designated" for transfer to CDHS or to the subsequent Contractor upon CED?	Only those records that are required to be transferred to the new Contractor will be provided upon CED. The new Contractor will be required to request the authority to destroy HCO Program records prior to transfer to the next contractor upon CED. This authority will be issued at the end of the new Contract, as necessary.

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153	Exhibit A - Attachment II -	Section 8.1	Security and Confidentiality 8-1	Please clarify the intent of the two RFP sections. Will the Contractor be responsible for implementing the Security and Confidentiality plan by CED as described in this section, or are they to be fully implemented two (2) weeks after CED as described in Takeover.	The Contractor shall be responsible for implementing the Security and Confidentiality Plan within one (1) business day after CED. The language will be revised in an addendum.
154	Exhibit A - Attachment II -	Section 8.2.E	Security and Confidentiality 8-1	Are the NIST special publications located in the Data Library? If not, could you describe where to locate them?	NIST special publications may be located at the following website: http://csrc.nist.gov/publications/nistpubs/
155	Exhibit A - Attachment II -	Section 8.3	Security and Confidentiality 8-1	Assuming that the requirement for encryption applies to transmissions of MEDS and EDS Net data to and from CDHS and the Contractor, please advise of the encryption methodology to be directed by CDHS.	There are many methods available. The final determination would depend on what is proposed. The intent of this requirement is to ensure confidentiality of transmissions end-to-end.
156	Exhibit A - Attachment II -	Section 8.4.4.C	Security and Confidentiality 8-8	Please advise if the Contractor is required to validate the NPI using the check digit prior to processing in the HPE system. What actions should the Contractor take if the NPI is not a valid number? Should the transaction form, I.e. the Medical Exemption Request form be returned for correction?	The Contractor is not required to validate the NPI. The Contractor shall be responsible for validating that the physician is an approved Medi-Cal provider.
157	Exhibit A - Attachment II -	Section 10.10	HPE Process 10-8	May bidders assume for purposes of completing their proposal that no changes will occur to the	At this time, the CDHS does not foresee changes to these data formats; current data formats with MEDS, health plans, etc., are

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				current data format used between the current Contractor and MEDS, the healthplans, etc? Does CDHS foresee changes to these data formats? Are current data formats with MEDS, health plans, etc. anticipated to change?	not anticipated to change.
158	Exhibit A - Attachment II -	Section 10.11.1 A	HPE Process 10-9	Refer to section 1.4.3 F time hours for clarification. 98% calculation conflicts with the 1/2 hour per week unscheduled downtime stated. Is system downtime calculated by the core HPE system being off-line, or ancillary systems as well? (for example if the Web site system is offline, does that imply that the entire HPE is down?)	<p>The ninety-eight percent (98%) calculation for downtime of the HPE Process applies to the core HPE Process, while ancillary system downtime applies to each individual ancillary system. Ancillary systems include the Telephone Call Center IVR system, BIT Process, etc. For example, if the Customer Service Portal (ancillary system) is offline, it does not imply that the core HPE Process is down.</p> <p>Section 1.4.3.F language will be revised to correspond with Section 10.11.1.A.</p>
159	Exhibit A - Attachment II -	Section 10.17.1	HPE Process 10-14	Please confirm that test transactions inserted into the live system will be reported, and reflected in all areas of the HPE system, just as any other live transaction?	The live-transaction testing process will be utilized by the CDHS, with notice to the Contractor. This language will be revised in an addendum.
160	Exhibit A - Attachment II -	Section 10.18 C	HPE Process 10-17	If an IV&V is contracted for the development and/or implementation of large/complex system changes, will CDHS	Yes, the CDHS will ensure that all direction received from the contracted IV&V contractor will follow the communication requirements described in Exhibit E,

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				ensure that all direction received from the contracted IV&V follow the communication requirements described in Exhibit E, Section 17.D?	Section 17.D.
161	Exhibit A - Attachment II -	Section 10.18.1.1.B.5	HPE Process 10-18	Please clarify what other information may be requested by the state?	Other types of information that may be requested by the CDHS include documentation which illustrates that the requested system change has been successful.
162	Exhibit A - Attachment II -	Section 10.18.3.2.1	HPE Process 10-19	What is the definition of SFD? There appears to be inconsistent use of the definition of SFD in this section as defined in Appendix 1.	The definition of SFD has been corrected to read 'System Functional Design. The language will be revised in an addendum.
163	Exhibit A - Attachment II -	Section 10.18.3.2.1 C	HPE Process 10-20	What are the other SDN outputs? Any examples?	The SDN output depends on the type of system change.
164	Exhibit A - Attachment II -	Section 10.18.3.3.1.D	HPE Process 10-21	What is the section that is referred to here, the section contains question marks "Section 10.???"?	Correct. The reference on page 10-21 will be corrected to reference 10.17.4 in an addendum.
165	Exhibit A - Attachment II -	Section 10.20.D	HPE Process 10-25	How and who determines this?	The CDHS will determine the direction.
166	Exhibit A - Attachment III -	Section 1.6.2.D	1-10	Would CDHS consider revising the name of this report from the Weekly Deliverable Exception (WDE) Report to the Monthly Deliverable Exception (MDE) Report since this is a monthly deliverable.	Yes, the CDHS agrees to revise the name of the report to the Monthly Deliverable Exception (MDE) Report as it is a monthly, not a weekly, deliverable. The language will be revised in an addendum.
167	Exhibit A - Attachment II -	Sections 6.5.2.3, 6.5.2.4, 6.9.2, & 6.9.3	Reports 6-18 & Reports 6-27	The requirements for Trouble Reporting Procedures and Reports & Balancing Procedures	Section 6.5.2.3 Trouble Reporting Procedures and Reports & Balancing Procedures and Reports apply even if an

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				and Reports from page 6-18 are repeated on page 6-27. Please clarify if the Trouble Reporting and Balancing procedures apply to all report deliverables?	automated system is proposed and accepted as a part of this Contract. Section 6.9.2 applies if an automated system is proposed and accepted as a part of this Contract.
168	Exhibit A – Attachment II	10.20.2	10-26	What is the intent of Additional Systems Group Staff discussed in 10.20.2? How does CDHS define the need to approve additional systems resources? Given the pricing parameters it is conceivable one system resource would be bid with a description of job duties and anything outside those duties would become additional needs under section 10.20.2.	The intent of additional Systems Group staff is to provide additional staffing resources in situations wherein current Systems Group staff cannot handle current workload and additional staff is needed to complete work in a timely manner. The Contractor will be required to provide written justification for additional Systems Group staff, and the use of the additional staff will require written approval from the CDHS.
169	Exhibit A – Attachment II	8.4.G.1	8-3	In the final draft of the RFP the Security and Confidentiality Section contained the requirement to “Address the requirements contained within this section and the following authorities: NIST SP800-59/60” a. NIS SP800-59 is titled “Guideline for Identifying an Information System as a National Security System” b. NIST SP800-60 is titled “Guide for Mapping Types	The appropriate standard would be SP 800-53, which is the Recommended Security Controls for Federal Information systems.

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				<p>of Information and Information Systems to Security Categories”</p> <p>c. Upon review of these two publication I cannot determine the applicability to the CA HCO Systems and Information.</p> <p>I would like to ask the following questions:</p> <p>Is the reference in Section 8.4.G.1 to NIST SP800-59/60 the correct reference? If the reference is correct, please clarify the applicability of the provisions of the two citations to the CA HCO Project and its related information systems and information.</p>	
170		1.4.1.B	1-3	Can the State provide a copy of the existing IVR script? How many calls are processed monthly through IVR?	No, the CDHS cannot provide a copy of the existing IVR script because an IVR system is not currently used in this project. The IVR system is not utilized in the current contract; therefore there is no IVR data to provide to Proposers.
171		1.4.3.M	1-7	In the event that voice messages are received close to the 5:00 pm cut-off are they expected to be returned by 5:00 pm that same day? For instance, if voicemails are received at 4:59 pm is the	The time cut-off requirement has been changed to 4 PM. The language will be revised in an addendum.

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				expectation that it would be returned within the remaining minute of the day?	
172		1.4.4.D.1	1-8	Can this be done as a post-call electronic survey or through means other than U.S. mail?	Yes, the CDHS will consider all means proposed to perform this survey. The language will be revised in an addendum.
173		1.4.3.N	1-7	Can the State provide the average weekly volume of calls and abandons for each threshold language for the most recent 13 weeks available?	This information can be located in the Data Library.
174		1.5	1-9	What are the addresses of each of the DPSS offices that conduct face-to-face Medi-Cal eligibility interviews and what is the volume of people in each facility who are referred for an HCO presentation?	If street addresses of DPSS offices are being referred to, please see sample presentation schedules in the Data Library. An ESR conducts face-to-face interviews at all DPSS offices in which HCO has stationed an ESR. For referral volume at each site, see reports located in the Data Library (Monthly Status Report).
175		1.5	1-9	Are there any fees associated with subcontracting space with the County Department of Public Social Services.	Currently, there are fees being paid for the subcontracting of space for HCO presentations.
176		1.5	1-9	Are the face-to-face presentations required to be one-on-one or can group presentations be made?	Group presentations are currently made and encouraged.
177		2.3.F	2-3	What is the current volume of non-HCO Program related documents received by the current vendor? How many checks do they receive and what is the required process	The current contractor receives anywhere from 80 to 160 pieces of misdirected mail in their mailroom each month. The volume varies from month to month depending on the level of service/diligence provided by

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				for dealing with these checks?	<p>the USPS on their account.</p> <p>The current contractor opens mail that is addressed to the HCO Program only. Mail that is addressed to other than the HCO Program remains unopened, and therefore, the current contractor does not know if any of the misdirected mail contains checks.</p> <p>The current contractor returns all misdirected mail to the USPS mail courier each day.</p>
178		2.4.4	2-5	At or shortly after contract award would a new vendor be able to receive electronic versions of current informing materials in all threshold languages in a proof ready status?	Yes, electronic proofs of informing materials in all threshold languages will be made available to the new vendor.
179		2.5.C	2-6	What is the current volume of mailing required by CDHS to “HCO Presentation Sites, health plans, and other interested parties”?	This information is located in the Data Library.
180		2.7.3	2-15	When will CDHS inform the contractor of which provider directories it is responsible for and which it is not?	The CDHS informs the Contractor of which provider directories it is responsible for and for which it is not as the Medi-Cal Managed Care Division informs the Payment System Division. The number of “State printed” vs “PlanProvided” provider directories changes based on the health plans’ prerogatives.

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181		2.9.5.D	2-22	Is the contractor responsible for the original printing costs or just misprints?	The Contractor is responsible for the printing costs of misprinted publications. CDHS will only reimburse printing costs for error-free publications.
182		2.9.4.5	2-20	Focus groups are “typically” conducted for new publications. How often are new publications typically developed? Would substantial changes to existing publications require focus groups? If so, how often do such changes typically take place?	Historically, CDHS performs 1 – 2 total focus group research projects each year. This estimate includes focus group research projects for both new publications and for when substantial modifications are made to existing publications.
183		3.11.1.A	3-6	This section indicates that enrollment/disenrollment processing should be available 7 am to 6 pm and include in the description “customer assistance”. Does this imply that the full customer service/telephone function should also be available? This would be in conflict with section 1.4 p. 1-2 in Exhibit A, Attachment II which requires the call center to be open from 8 am to 5 pm. Could the state please clarify?	The Enrollment/Disenrollment Process shall be available per Section 3.11.1.A. The TCC function is to be available per Section 1.4.
184		6.4E	6-2	The requirement indicates that the CDHS will determine the medium in which the RUM is produced and	No, the CDHS has not determined the medium in which the RUM is produced and stored. The vendor is expected to propose

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				stored. Has the CDHS already determined the medium, if so what is it? If not, shall the vendor propose one?	one that meets all of the requirements as specified in the Contract.
185		7.3.E	7-3	Can the CDHS provide a list of documents that it currently requires be kept in some format other than electronic and what the required retention format is for each document? If the CDHS expects that any of the listed documents may be later approved for electronic retention please indicate that as well.	Yes, this information is located in the Data Library. The CDHS anticipates that most documentation over ninety (90) calendar days old will be converted to electronic format.
186	Exhibit A Attachment II	1.4.1 C	1-3	Considering that "Applicants/beneficiaries shall have the ability to access the tracking process through a 'ticket' which has multiple channels," what might those channels be? Do they include no-telephony access modes, such as, website form or email?	The Proposer is allowed to propose any method they choose for the 'ticket' process that shall meet the requirements as stated in the Contract.
187	Exhibit A Attachment II	2.5.2 B:	2-7	Are the "Daily Mailings" electronic transmissions or postal deliveries?	The daily mailings are postal deliveries and produced from the "daily eligibles file" which is sent electronically to the fulfillment subcontractor.
188	Exhibit A Attachment II	3.7.1 E	59	Does the CDHS email system support or require email encryption, as for example "Pretty Good Privacy" (PGP)?	Yes, the CHDS email system supports and requires email encryption.

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189	Exhibit A Attachment II	3.7.3	60	Do the transmissions to HMOs require X12 834 transaction format?	At this time, the transmissions to the HMOs do not require the X12 834 transaction format (HIPPA). More detailed information is located in the Data Library.
190	Exhibit A Attachment II	3.9 J	3-5	Does "maintain sufficient logs to produce access logs to all images" mean that all read operations, as well as create/update/delete access must be audited?	The 'maintain sufficient logs to produce access logs to all images' means that all read operations, as well as create/update/delete access may be audited.
191	Exhibit A Attachment II	3.7.1 C	3-3	Does "immediate retrieval of enrollment data from and by health plans and other parties" mean the ability for them to upload it as soon as the contractor posts it, or, the ability for these parties to extract data on demand?	Yes, this does mean the ability for them to upload it as soon as the Contractor posts it.
192	Exhibit A Attachment II	3.11.2	3-7	This response time requirement would seem to imply an automated monitoring and reporting mechanism. What mechanisms would be satisfactory for doing this: server-side protocol analysis, client-side protocol analysis, or user interface instrumentation, etc? What technique is currently used?	H Letter #0901-0067 removed the monitoring and reporting requirement from the current contract. However, CDHS reserved the right to request monitoring and reporting of system response time should it become necessary. The tool(s)/protocol(s) to be used should allow for client statistics that track execution time. Execution metrics for databases and thin client computing are expected to be a part of meeting this contractual requirement.
193	Exhibit A Attachment II	3.11.4 B	3-7	Could unfettered ad hoc inquiries by CDHS be satisfied by accessing replicated data rather	Replication of data is acceptable. The recency of data should be one week at a minimum. An addenda will address this

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				than running against the transactional system? This might reduce the risk of degrading the production environment. If that is acceptable, what recency of data would be satisfactory?	change.
194	Exhibit A Attachment II	3.11.4 H 3	3-8	Can the requirement that "CDHS shall have the capability to test the Enrollment/Disenrollment Processing" be satisfied through access to a test system (as with 3.11.4 F) or is access to production data required?	The requirement may be satisfied through access to a test system (as with 3.11.4 F).
195	Exhibit A Attachment II	3.11.4 H 4	3-9	Does the statement "Provide the CDHS with the capability to pull random samples from the available information files and tables, and to run tests under randomized conditions" mean that CDHS expects the contractor to provide an automated system testing tool, with random selection capability, for CDS use?	Yes, the statement means that CDHS expects the Contractor to provide an automated system testing tool, with random selection capability, for CDHS use.
196	Exhibit A Attachment II	3.14.1	3-11	In the statement "CDHS reserves the right to utilize live transactions .. to test the Contractor's performance if necessary," does "performance" mean response time, functional performance, or both?	Performance means both response time and functional performance.
197	Exhibit A	3.14.1	3-11	Considering that "CDHS reserves	Clarification of the question is needed for a

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	Attachment II			the right to utilize live transactions .. to test the Contractor's performance if necessary," how shall we differentiate live versus test data for purposes of operations, performance metrics, accurate reporting, enrollment/disenrollment from managed care entities, etc?	meaningful response.
198	Exhibit A Attachment II	3.14.3 A	3-11	The requirement "test information shall include a true reflection of daily, weekly, monthly and semi-monthly volumes of enrollment data" implies a large amount of data. To satisfy the requirement for volume and ensure the data is a true reflection, would it be satisfactory to use a scrubbed/depersonalized variant of production data? What is the size of the current production database?	In response to the first question, please see response to question #161. The space that is currently allocated for the production database is 4 terabytes.
199	Exhibit A Attachment II	3.18 D	3-23	Under what circumstances, if any, might electronic submission (e.g., via website or email) be deemed a "secure, traceable shipping mode" for forms entry? Website with HTTPS access? Secure email?	Electronic submission would be approved provided the solution provides for secure login credentials (username / password), SSL, audit trails of the activities (success/failure).
200	Exhibit A Attachment II	3.18.1 C 3	3-24	By "Check MEDS each business day" do you mean using the Meds	The only way to access MEDS is electronically.

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				daily file or some form of online access?	
201	Exhibit A Attachment II	3.18.3 C 1 b	3-29	In order to "Forward each request form to the CDHS for review and approval" is it necessary to forward a hard copy or is electronic from acceptable?	The request forms may be submitted to CDHS in electronic form, which is the procedure used currently.
202		1.5.2	1-7	What have been identified, either anecdotally or quantitatively, as the reasons applicants choose not to go to face-to-face HCO presentations?	The Enrollment Survey Task Force report, which contains information regarding this subject, is located in the Data Library.
203	Exhibit A Attachment II	6.4 H 1	6-4	How are confidentiality and security assured for email Reports Distribution?	The confidentiality and security of PHI/confidential information is assured when emailing reports through the Reports Distribution process via on-line encryption methods.
204	Exhibit A Attachment II	6.9.1 B	6-27	Must certain safeguards be taken (e.g., audit procedures, recording of reason for query, or use of "headless" data) to assure HIPAA compliance when running ad hoc reports involving protected health information?	Yes, certain safeguards must be taken (e.g., audit procedures, recording of reason for query, or use of "headless" data) to assure HIPAA compliance when running ad hoc reports involving protected health information.
205	Exhibit A Attachment II	8.2 E	8-1	When saying "Ensure compliance with ISO," do we mean International Standards Organization? Which ISO standards?	Yes, the CDHS intends the Contractor to be compliant with International Organization for Standardization (ISO). The Contractor shall be ISO compliant with the standards that apply to this industry.
206	Exhibit A Attachment II	8.4.1 D	8-5	Does the requirement to "Secure all Contractor facilities...[with a]	The requirement for a key card system, as stated in the Contract section, applies to all

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				key card system using a two- (2) factor authentication" apply only to sites that physically house computers and sensitive information, or does it extend to administrative offices, software development sites etc?	Contractor sites that perform HCO Operations activities.
207	Exhibit A Attachment II	8.4.1 E	8-6	Under what circumstances is the contractor able or required "to access Medi-Cal Eligibility Data System (MEDS) and any other system needed to perform HCO Operations functions via computer terminal?" To what systems will the contractor require online access?	The Contractor will be required to access MEDS and EDSnet in order to process Exception to Plan Enrollment Request forms and respond to questions/issues/concerns raised by beneficiaries and their representatives, etc.
208	Exhibit A Attachment II	10.12 C	10-11	Please clarify "sessions opened by external CDHS users shall be identical, in terms of functionality, to sessions opened by internal Contractor personnel." Are we saying in other words that no distinction should be made based on network location? Is it permissible for security reasons, for example, to exclude non-authorized network locations from access to HPE? May sessions be granted differing capabilities according to Roles-based Access Controls?	Yes, no distinction should be made based on network location. It is permissible for security reasons, for example, to exclude non-authorized network locations from access to HPE. Sessions may grant differing capabilities according to Roles-based Access Controls.

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209	Exhibit A Attachment II	10.12 D 2	10-12	Please clarify "All session connections to web enabled applications must employ end-to-end encryption." For example, does "end-to-end" apply to all networks including private networks? Does it apply even to communications between servers in the same locked machine room? Would non-Web protocols (e.g., remote method invocation) require encryption under similar circumstances?	The intent is to protect data as it travels between networks, including trusted network to trusted network and private networks. Data classified as confidential and sensitive must be protected throughout transmission to ensure confidentiality. The reference to remote method invocation is not understood.
210	Exhibit A Attachment II	10.12 D 2	10-12	So long as a Web-based interface is functionally rich (e.g., drop-down menus, copy and paste) is it specifically to support drag-and-drop?	No, even if the Web-based interface is functionally rich (e.g., drop-down menus, copy and paste) it is not specifically to support drag-and-drop.
211	Exhibit A Attachment II	10.12 D 2	10-11	Does "make full use of the current personal computer" mean that a "thick client" is preferred or required? If so, what client distribution mechanisms (e.g., Java Web Start) are preferred or acceptable	The CDHS is not clear of what is being asked. Clarification of the question is needed for a meaningful response.
212	Exhibit A, Attachment II	6.5.6 A 1.	6-22	The line item reads: " 1. Total number of threats to Sensitive and/or Confidential Information by accidental disclosures, modifications and/or destruction;" - Does total number of threats refer	This requirement refers to all threat events.

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				to all threat events or all that end up having an impact?	
213	Exhibit A, Attachment II	6.5.6 A 6.	6-22	The line item reads: " 6. A summary of the daily video surveillance monitoring. " - Does the state have a preferred standard or format that they use for these summaries?	The CDHS does not require this summary in the current contract. The Proposer shall propose a standard or format to use.
214	Exhibit A, Attachment II	7.5 C 3.	7-3	The line item reads: " All records not subject to public disclosure shall be identified, along with the reason the public disclosure is not allowed (e.g., contains confidential or proprietary information)." - Does the state have a preferred standard or format that they use for identification of records?	The standard or format that the CDHS prefers be used for identification of records is that which is compatible with the CDHS tools of identification of records. Further information is located in the Data Library.
215	Exhibit A, Attachment II	7.6	7-4	The line item reads: " Any electronic formats and/or transmission methods used must be fully secure since they may contain Protected Health Information (PHI) and/or confidential data. The Contractor shall be responsible for identifying documents that contain PHI and/or confidential data and when requested by the CDHS, provide those documents containing PHI and/or confidential data separately from those that do not." - Does the	The answer depends on the solution presented by the vendor. The intent is to employ controls to protect confidentiality, integrity and availability of systems and data.

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				state utilize or have a specific checklist for evaluating the controls around PHI data?	
216	Exhibit A, Attachment II	7.6 A 3.	7-5	The line item reads: " Upon request from the CDHS, the Contractor shall provide certification of the authenticity of any record retrieved. This requirement shall continue for three (3) years after the final payment of the Contract or the final date of litigation, whichever is longer." - Does the state have a set of preferred guidelines or standards for providing certification of authenticity?	The guideline or standards for providing certification of authenticity are those utilized in the current contract. This information is located in the Data Library.
217	Exhibit A, Attachment II	7.9	7-7	The line item reads: "The Contractor shall establish and maintain procedures, consistent with the security provisions in Exhibit A, Attachment II, Section 8, Security and Confidentiality, for providing authorized CDHS and federal employees, agents, or representatives with access to all HCO Program records held in the Contractor's custodianship. These access procedures shall be approved by the CDHS and maintained in the RP&P manual. All such procedures shall be	Modifications will be provided to the Contractor through the use of C Letters. Examples of these letters used in the current contract, termed H Letters, are located in the Data Library.

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				subject to modification by the CDHS at any time." - What mechanism does the state utilize for notification of modification?	
218	Exhibit A, Attachment II	7.10.1 D.	7-8	The line item reads: "Make available to the CDHS workstations through which CDHS staff may access the document management database system whenever access through the CDHS own network is unavailable (due, for example, to an infrastructure failure on the CDHS network). CDHS staff shall have at least the same level of access as was available through its own network." - Is this the same space as utilized by the On-Site Monitoring and Audit Staff documented in Exhibit E?	Yes, this is the same space as utilized by the On-Site Monitoring and Audit Staff documented in Exhibit E.
219	Exhibit A, Attachment II	8.4 E 1.	8-2	The line item reads: " E. Provides detailed standards and procedures for the following items: 1. Identifying and marking of Sensitive Information" - Does the state have a standard that they prefer in this area?	No, the CDHS does not have a preferred method for identifying and marking Sensitive Information. However, the method proposed shall be usable by all authorized users.
220	Exhibit A, Attachment II	8.4.1 C.	8-4	The line item reads: "C. Permit authorized CDHS and federal representatives to access any facility, equipment, and related	Yes, the CDHS has procedures that will be provided to the Contractor during Takeover.

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				materials covered by this Contract." - Does the state have a set of procedures for establishing the identity and approving access that they currently utilize?	
221	Exhibit A, Attachment II	8.4.1 F.	8-6	The line item reads: " F. Protect all information files, whether hard copy or electronic copy, to prevent unauthorized access." - Does the state utilize or have a preferred framework for evaluating the controls around these types of data?	The answer depends on the solution presented by the Proposer. The intent is to employ controls to protect confidentiality, integrity and availability of systems and data.
222	Exhibit A, Attachment II	8.4.2 A.	8-6	The line item reads: "The Contractor shall not disclose information classified as sensitive or confidential without advance written authorization from the CDHS and without using CDHS-approved encryption solution for electronic media." - How does the state evaluate and approve encryption solutions? Is there a list of currently approved solutions?	The CDHS reviews the request to determine the data classification and risk of the data. The solutions follow industry recognized best practices and solutions depending on the situation. The intent is that the Contractor does not disclose data without CDHS approval and when disclosure has been authorized, the Contractor ensures the method and solution is appropriate.
223	Exhibit A, Attachment II	9.6.3 H.	9-7	The line item reads: "H. Availability of adequate telephone resources including TCC toll-free telephone lines and all necessary peripherals for the TCC functions." - Does the state utilize or have a specific framework for evaluating	The CDHS framework for evaluating what are adequate telephone resources (including TCC toll-free telephone lines and all necessary peripherals for the TCC functions) are the requirements of the Contract. The resources determined by the Contractor are those they believe are

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				what is an adequate amount?	necessary to meet all Contract requirements.
224	Exhibit A, Attachment II	9.7 A.	9-7	The line item reads: "A. Implement safeguards that provide adequate protection against all risks identified in the Risk Analysis/Assessment report, including terrorism and biological threats." - Does the state utilize or have a preferred framework for evaluating what is an adequate protection?	The CDHS framework for adequate protection are the requirements of the Contract. Adequate protection is determined by the Contractor that they believe are necessary to meet all Contract requirements.
225	Exhibit A, Attachment II	10.3 A.	10-2	The line item reads: "A. Recording, identifying, indexing and filing all forms and documents associated with the enrollment and disenrollment processes. All workstations/laptops used to support the Contract must be encrypted, and provide a mechanism for securing of removable media." - Does the state prefer a specific standard for encryption? Does the state have a preferred framework for securing removable media?	There are many solutions that would be acceptable to the CDHS, i.e. PointSec, Ecora Device Lock, GuardianEdge, etc. For securing removable media, the CDHS requires the solution to allow/disallow user's use of removable media based on group membership and device. The CDHS strives for the highest practical standard of encryption (e.g. AES256) that ensures confidentiality of the data.
226	Exhibit A, Attachment II	10.3 I.	10-3	The line item reads: "Interfacing with secure web sites (e.g., internet, extranet, and intranet sites) for secured communications with applicants, beneficiaries, the	No, the CDHS does not have a preferred set of protocols or mechanisms for secure communications. The Contractor may use industry recognized best practices for developing and securing Web Portals.

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				California Department of Health Services (CDHS), other State and federal entities, health plans, and any other entities authorized to exchange information with the Contractor. The Contractor may also provide a secure web portal that authorized Contractor and CDHS staff may use for remote access to the HPE Process." - Does the state utilize or have a specific guideline for information exchange and secure communications? Does the state have a preferred set of protocols or mechanism for secure communications?	
227	Exhibit A, Attachment II	10.18.3.2.1 I.	10-20	The line item reads: "I. A Security Risk Assessment performed by the Information Security Officer (ISO) identifying potential threats, and vulnerabilities as a result of the change." - Does the state utilize or have a specific format or framework of risk assessment that is preferred?	The Contractor may use NIST and OMB A-130 guidelines for Risk Assessments. The Contractor may refer to the NIST 800 series special publications.
228	Exhibit A, Attachment II	3.7.2 D	3-4	The line item reads: " The Contractor shall: D. Ensure that system communications with MEDS are secure." - Does the state have a set of standards (or	No, the CDHS does not have a set of standards (or preferences) for secure communication with MEDS. The standards or preferences to be used depend upon the solution provided and how the transmission

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				preferences) for secure communications with MEDS?	was to occur: mainframe, windows, Unix, over what circuits, etc.
229	Exhibit A, Attachment II	Records Retention and Retrieval	7-4	The line item reads: "Any electronic formats and/or transmission methods used must be fully secure since they may contain Protected Health Information (PHI) and/or confidential data. The Contractor shall be responsible for identifying documents that contain PHI and/or confidential data and when requested by the CDHS, provide those documents containing PHI and/or confidential data separately from those that do not." - What Information Fields are found in Healthcare enrollment forms?	Examples of Health Care Options enrollment forms, and thus, the information fields on those forms, are located in the Data Library.
230	Exhibit A, Attachment II	Sections 3 & 10	3-x, 10-x	The RFP duplicates contractual and proposal requirements within the Enrollment and HPE sections. If a vendor chooses to use technology, specifically within the HPE, to enable the enrollment requirements is it acceptable to capture and describe these within the Enrollment section, though this would require the reader to refer to the HPE section for this content. This will prevent	Yes, it is acceptable to capture and describe these within the Enrollment section even though this would require the reader to refer to the HPE section for the content. CDHS requires the Proposer to clearly indicate where the reader will locate this information within the HPE section.

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				duplication and will allow vendors to maximize their page allocations in each of these key areas while still providing adequate description of their approach.	
231	Exhibit A, Attachment II	1.4.4 A	39090	What percentage of calls should be voice recorded for QA?	The CDHS intention is that all phone calls will be voice recorded and that a statistically valid, random sample shall be reviewed for Quality Assurance, as required in the Contract.
232	Exhibit A, Attachment II	6.5.1.1 E	39239	What is the total monthly volume of faxes?	This information is located in the Data Library.
233	Exhibit A, Attachment II	6.5.1.1 E	39239	What is the Fax Document average length?	This information is located in the Data Library.
234	Exhibit A, Attachment II	6.5.1.3	39239	How many calls are issued monthly via the PDS? What is the current call handle time for PDS calls? What is the current percentage of PDS calls that go unanswered? How is the PDS integrated in the existing TCC (e.g., IVR/PDS based)?	The PDS is not utilized in the current contract; therefore there is no PDS data to provide to Proposers.
235	Exhibit A, Attachment II	8.4.2 A	8-6	"CDHS-Approved encryption solution for electronic media" implies an existing solution or list of approved solutions. If so, kindly provide that list.	The intent is for CDHS to retain the right to approve the encryption methods. Bidders should evaluate their solution and ensure they are using industry standard methods (i.e. non-proprietary) methods to protect the confidentiality of the data.
236	Exhibit A, Attachment II	6.5.1.9 A	6-12	"Provider Information Network Availability" -- by what metrics and	The Provider Information Network is not utilized in the current contract; therefore

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				tools is this currently measured? What availability metrics and approaches are acceptable, e.g., reporting from system logs, monitoring by external contractor-provided system, monitoring through third-party Internet service, etc?	there is no Provider Information Network data to provide to Proposers.
237	Exhibit A, Attachment II	10.3 K	10-4	"Implementing an electronic document management database system that runs on an industry-standard hardware platform, and within an industry-standard database management system software environment. The system shall employ the latest widely accepted industry standards, designs, formats, software and/or media and comply to industry standards which are published in American National Standards Institute (ANSI)/Association for Information and Image Management (AIIM) standards documents." What would be regarded as industry-standard hardware? Which ANSI, AIIM and other standards specifically apply?	Industry standard hardware includes Tier 1, companies like Dell, Hewlett Packard, etc. The Proposer should review their solution against applicable ANSI standards.
238	Exhibit A, Attachment III,	1.7.1	10	In Exhibit A, Attachment III, Section 1.7.1, page 10, the RFP states "The Contractor shall	A Training Program and Plan will not be required in the Takeover and Operations Phases of the HCO Contract.

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				submit to the CDHS a comprehensive Training Program ... to accomplish the required training of all successor Contractor management..." A training program and plan were included in the Draft RFP; however they are no longer listed in the Takeover or Operations Phase of the contract. Would CDHS please clarify whether a Training Program and Plan will be required in the Takeover and Operations Phase of the HCO Program?	
239	Exhibit A, Attachment III,	11.8.D.2	1-21	Would CDHS provide an estimate of the volume of mail that the Contractor must return via a mail courier service following completion of the Post-HCO Program Operations Phase? Would the USPS return mail service suffice for this requirement?	HCO does not have an estimate of the volume of mail that the Contractor must return via a mail courier service following completion of the Post-HCO Program Operations Phase. Therefore, HCO does not know if the USPS return mail service will suffice for this requirement.
240	Exhibit A, Attachment IV	1.3.E	1-4	If the ACS that has been approved required development/infrastructure development will the contractor be compensated for any unamortized portion of that effort if the CDHS decides to terminate it?	The CDHS will reimburse the Contractor for all ACS expenses it incurs that have been pre-approved in writing by the CDHS.

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241	Exhibit B, Attachment I	Section 1.10	18	Will ESR hours for meetings be reimbursable if such meetings are in support of HCO operations & specific to HCO operations?	The Contract pays for negotiated FTEs (currently 100). As an example, any hours over 16,000 in a given month (160 hrs. X 100 ESRs) are not paid by CDHS. Field Operations staff meetings are considered a legitimate use of ESR's time but are not reimbursable beyond the maximum monthly hours.
242	Exhibit B, Attachment 1,	1.8.1	15	Would CDHS please clarify the difference between the unit prices listed in G and K and the bid prices listed in H of Exhibit B, 1.8.1, TMTCC Monthly Reconciliation Payment Reports?	Exhibit B, Attachment I, Section 1.8.1.H was inadvertently included and will be removed in an addendum.
243	Exhibit B and B - Attachment I.	Section 1.5	Page 9 of 33	The Draft RFP indicated the contract would contain a mechanism to adjust reimbursement to the Contractor for changes in page counts for HCO Informing Packets, however this provision was removed from the Final RFP. What payment mechanism will the Contractor use to adjust reimbursement for changes in page counts in HCO Informing Packets?	If the need arises, the Contract amendment and/or change order process will be used to adjust the HCO Informing Packet Mailings bid rate.
244	Exhibit B and B - Attachment I	Section 1.14.1.2	Page 25 of 33	What is the reimbursement mechanism should the Contractor use for Section 2.5.9 Other HCO Informing Materials, such as	Envelopes that are provided to the health plans will be reimbursed through Exhibit B, Attachment I, Section 1.14.1.2.B. The language in this section will be revised in an

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				envelopes and sample packets that are sent to Managed Care Plans or other CDHS designed individuals/entities?	addendum as follows: B. Choice Forms and return envelopes that are provided to managed care plans; and All informing packets, including sample packets, shall be reimbursed through Exhibit B, Attachment I, Section 1.5.
245	Exhibit B and B - Attachment I	Section 1.14.1.3	Page 25 of 33	For those materials that are designated as part of the fixed price, what payment mechanism will be used to cover increases in production costs if CDHS directs changes to these materials that add pages, change construction, or require a change in the Contractor's proposed production method?	If the need arises, the Contract amendment and/or change order process will be used to adjust the HCO Informing Packet Mailings bid rate.
246	Exhibit B and B - Attachment I	Section 1.14.1.5	Page 25 of 33	There is a payment provision for focus testing of HCO Informing Materials, however there is no corresponding scope of work describing the requirements governing this function. Is it CDHS intent to allow/require the Contractor to perform Focus Testing for HCO Informing Materials?	At this time, the CDHS is not requiring the Contractor to focus test HCO Informing Materials; therefore, the sentence addressing focus testing in Exhibit B, Attachment I, Section 1.14.1.5 will be removed.
247	Exhibit D(F) -	Section 4.g.4	Page 7 of 26	Will CDHS incorporate or modify the following changes in the following subsections under	The language set forth is section D(F) is governed by the Department of General

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				Section 4.g.4: a = Delete the words "and/or Subcontractor" in the last line; d = Delete the words "thirty (30)" in the 1st line and replace with "ten (10)"; e.2 = Insert the words "the Contractor's" before the word "work" in the 2nd line down; e.3 = Delete the words "but not limited to" in the 3rd line down; f = Insert the word "reasonable" before the word "approval" in the 2nd line down.	Services and federal law. Without substantial and adequate justification, no changes will be made to this section.
248	Exhibit E -	Section 2.C.1.I	Page 3 of 57	Please clarify if this provision is \$10,000 or \$5,000 (The word "ten" appears to be inadvertently added).	The correct provision is \$5,000 and will be corrected in an addendum.
249	Exhibit E -	Section 9	Page 8 of 57	Will CDHS incorporate or modify the following changes in the following subsections under Section 9: Paragraph 1 Sentence 1 = Change the words "fidelity bond" to "Commercial Crime insurance policy" in the first line; B = change the words "fidelity bond or other security" in the 1st & 4th lines to "Commercial Crime insurance policy". Also insert the word "reasonably" before the word "satisfactory" in the last line; B.1 = Delete in its entirety and replace with "The CDHS shall be included	The term "other security" would encompass an insurance policy that maintains the proper areas of coverage. Without substantial and adequate justification, no changes will be made to this section.

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				as a loss payee on the policy."; B.2 = Insert the word "material" before the word "changed" in the 2nd line down; Delete the words "but not limited to" in the 2nd line down; Delete the word "bond" in the last line and replace with "policy".	
250	Exhibit E -	Section 10	Page 9 of 57	Section 10 of Exhibit E indicates that all correspondence received after 2:00pm will be considered received the following business day. This requirement conflicts with Section 17.E of Exhibit E (Noon of a business day) and Exhibit A - Attachment II, Section 6.7.A (4:00 PM of the day due). Please clarify the due time for contract correspondence.	The language regarding the noon deadline for correspondence has been revised to read 2 PM. The language has been further revised to state all reports received as of the required time and day listed in Section 6.7, Delivery of Reports, will be date stamped with the date received. The language will be revised in an addendum.
251	Exhibit E -	Sections 15.A.4.a & 15.A.4.b	Page 14 of 57	Is it CDHS intent to have these two (2) positions designated as part of the Senior Management team?	Yes, it is CDHS intent that these two (2) positions be designated as part of the Senior Management team. These positions must report to the highest level of the Senior Management team and not to Operations level people. These two staff should be independent officers. This is an industry standard.
252	Exhibit E -	Section 20.A	Page 17 of 57	Will CDHS allow the Statewide Field Operations Director or equivalent to be stationed within the largest county of the Health	No, CDHS will not change the requirement as listed.

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				Care Options program rather than the Contractor's main operating facility in Sacramento?	
253	Exhibit E -	Section 35	Page 39 of 57	Will CDHS incorporate or modify the following changes in the following subsections under Section 35: 1st sentence delete the words "fidelity bonding" in the 1st line and replace with "Commercial Crime policy"; C.2 = Change the word "Comprehensive" to "Commercial" in the 1st line. Also insert the words "of the Contractor's" before the word "locations" in the 3rd line down; D = Change the word "Contract" in the 3rd line down to "Contractor's"; E.2 = insert the word "Contractor's" before the word "operations" in the 2nd line down; E.3 = Delete the words "failure by the Contractor to pay premiums" in the 1st line and replace with "cancellation or nonrenewal". Also, delete the words "any other" in the 1st line and replace with "material"; Next paragraph = Change the words "thirty (30)" in the 3rd line down to "ten (10)". Also, insert the word "reasonable" before the word	With respect to the first two suggested edits, an addendum will be issued. Without substantial and adequate justification, no other changes will be made to this section.

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				"approval" in the 6th line down.	
254	Exhibit E -	Section 41.B	Page 49 of 57	Could CDHS provide specifications related to the three (3) "quiet rooms" described in Section 41.B? Are these similar to a small conference room or office?	Yes, the quiet rooms described in Section 41.B are similar to a small conference room or office.
255	Exhibit E,	35	39	The second paragraph defines "a third party carrier" as used in this section as "an insurance company and/or bonding company licensed by CDHS to provide the required lines of coverage and in the amounts required by the Contract." For purposes of ensuring conformity, is it sufficient if the Bidder's insurance company is licensed to do business in the State of California, or is it separately required that the company be licensed by CDHS?	A Bidder's insurance company must be licensed by the California Department of Insurance. An addendum will be issued to resolve this discrepancy.
256	Exhibit E,	35.C.2	40	Will it be acceptable to CDHS for a Bidder to meet the specified insurance limit requirement using a combination of appropriate insurance vehicles, such as General Liability Policy limits combined with Excess Liability Policy limits to attain the specified amount?	No. A Bidder should obtain a Commercial General Liability (CGL) policy with a policy limit of five-million dollars as called for in the RFP. Other forms of insurance may not encompass the breadth of coverage that a CGL policy covers.
257	Exhibit E	31.B.	39	Would CDHS clarify that the	This question cites an incorrect section of

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				Contractor and subcontractors may satisfy the requirement for "fidelity bond or other security" or "bond" in Section 31.B. of Section E by providing insurance for employee theft of money, securities, or tangible property?	the RFP. However, the term "other security" in Exhibit E, section 9, would encompass an insurance policy that maintains the proper areas of coverage.
258	Exhibit E	46. Tours	Page 54 of 57	How should tours of the current operation be arranged?	Tours of the current operation may be arranged by contacting the Office of Medi-Cal Procurement (OMCP).
259	RFP Main	L.4.a	Page 51	Please identify the detailed Takeover activities and expenses that should be included in the proposal submitted by a proposer.	The detailed Takeover activities and expenses are expected to be those that the proposer feels are necessary to the completion of the Takeover portion of the contract. Since it is anticipated each Proposer may/will have a unique approach regarding Takeover, CDHS will not prescribe what the expenses should be at this juncture. CDHS will review the expenses and assumptions made, negotiate if needed, and approve the Takeover expenses after the award is final. This is one reason why the Takeover bid is not evaluated in the price proposal. Each Proposer should list only expenses they expect to incur and the activities required for those expenses.
260	Exhibit A, Attachment I, Takeover	1.12.7.10.A	1-39	Exhibit A, Attachment I, Section 1.12.7.10.A, page 1-39, states there are 2 business days to respond and correct a "Process	This language will be corrected in an addendum. A Process Variance Request, as stated in

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				Variance Request” during Acceptance Testing. Exhibit A, Attachment 1, Section 1.12.7.2.E page 1-33, states Contractors shall respond and correct all problems identified by CDHS as a result of the Acceptance Testing within 24 hours. Would CDHS please clarify the difference between these two sections and the response time(s) for problems found during Acceptance Testing?	Takeover Section Exhibit A, Attachment I, Section 1.12.8.6.A, requires the Contractor to respond and correct all issues found by the Contractor during Acceptance Testing within two (2) business days of discovery. Exhibit A, Attachment 1, Takeover Section 1.12.8.2.C.5, requires that all problems/concerns identified by CDHS during Acceptance Testing are to be responded to and corrected by the Contractor within twenty-four (24) hours of notification by the CDHS.
261	Exhibit A, Attachment I, Takeover	1.16	1-43	In Exhibit A, Attachment 1, Section 1.16.1, page 1-43, the first paragraph of this section indicates that the Records Retention Procedures Plan is due no later than 3 months prior to Assumption of Operations. However, in Section 1,16.2.D, page 1-44 states that these procedures are due no later than 4 months prior to Assumption of Operations. Would CDHS please clarify the required submission time-frame in order to accurately reflect the deliverables in the work schedule?	Exhibit A, Attachment 1, Section 1.16.1, page 1-43, first paragraph should read ‘The Contractor shall submit the Records Retention and Retrieval Procedures Plan for CDHS review and approval no later than four (4) months prior to Assumption of Operations.’ The language will be revised in an addendum.
262	Exhibit A,	1.19.1	1-45	The “Health Plan Enrollment	Yes, the Health Plan Enrollment (HPE)

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	Attachment I, Takeover			(HPE) Process Compliance Plan" referenced in Exhibit A, Attachment 1, Section 1.19.1, does not appear to be included in the Takeover Schedule in Exhibit A, Attachment 1, Section 1.5, page 1-7. Would CDHS please clarify if this Plan should be included in the Takeover Schedule?	Process Compliance Plan, as discussed in Exhibit A, Attachment 1, Section 1.19.1, should be included in the Takeover Schedule in Exhibit A, Attachment 1, Section 1.5, page 1-7. The language will be revised in an addendum.
263	Exhibit A, Attachment I, Takeover	1.19.2	1-45	It appears that the "Systems Group Procedures Manual" referenced in the Takeover Schedule in Exhibit A, Attachment I, Section 1.5, page 1-7 and the "HPE Process Procedures and Systems Group (SG) Manual" referenced in Exhibit A, Attachment I, Section 1.19.2 are the same deliverable. Will CDHS clarify the difference between these two deliverables?	The Takeover Schedule inadvertently excluded the Health Plan Enrollment (HPE) Process Compliance Plan, as discussed in Exhibit A, Attachment 1, Section 1.19.1. This deliverable shall replace the first deliverable listed under the HPE Process heading, 'Submit Systems Group Procedures Manual, within the Takeover Schedule in Exhibit A, Attachment 1, Section 1.5, page 1-7. The language will be revised in an addendum.
264	Exhibit A, Attachment I, Takeover I	1.20.1	1-45	Would CDHS please clarify the difference between the "Information Files" discussed in Exhibit A, Attachment I, Section 1.12.5, page 1-27 and the "Files" discussed in Exhibit A, Attachment I, Section 1.20.1, page 1-45?	The language will be revised in an addendum. The Takeover Section language has been revised in an addendum. The Information Files in Section 1.12.5 refers to a manual process of handling Information (Data) Files. Section 1.20.1 (to be revised to Section 1.19.5) refers to an automated

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#	RFP Reference	RFP Section	Pg #	Question/Comments	Responses
					process of handling the same files.
265	Exhibit A, Attachment I, Takeover	1.20.1.3	1-46	This section states that the communication protocols, line configuration, communication software, etc. requirements will be determined during Takeover. Since these items could significantly impact the Proposers time frame and cost for implementation, would CDHS please provide the communication protocols, line configurations, and communication software requirements in the RFP?	This information is located in the Data Library.
266	Exhibit A, Attachment I, Takeover	1.20.2.2	1-48	In the first paragraph of Exhibit A, Attachment 1, Section 1.20.2.2, page 1-48, there is a requirement to provide office space for six (6) CDHS staff during Systems testing. Would CDHS please clarify if these six staff are in addition to the 10 CDHS staff noted in Exhibit A, Attachment 1, Section 1.9.2.1, page 1-19?	The six CDHS staff is included within the ten CDHS staff as stated in Exhibit A, Attachment 1, Section 1.9.2.1, page 1-19.
267	Exhibit A, Attachment I, Takeover	1.20.3.10.A	1-58	Exhibit A, Attachment I, Section 1.20.3.10.A, page 1-58, states there are 2 business days to respond and correct a "System Variance Request" during Acceptance Testing. Exhibit A, Attachment 1, Section 1.20.3.2.E	A Systems Variance Request, as stated in Exhibit A, Attachment I, Takeover Section 1.19.7.6.A, requires the Contractor to respond and correct all issues found by the Contractor during Acceptance Testing within two (2) business days of discovery.

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				page 1-52, states Contractors shall respond and correct all problems identified by CDHS as a result of the Acceptance Testing within 24 hours. Would CDHS please clarify the difference between these two sections and the response times for problems found during Acceptance Testing?	Exhibit A, Attachment 1, Takeover Section 1.19.7.2.C.5, requires that all problems/concerns identified by CDHS during Acceptance Testing are to be responded to and corrected by the Contractor within twenty-four (24) hours of notification by the CDHS.
268	Exhibit A, Attachment I, Takeover	1.23.1.A	1-61	Exhibit A, Attachment 1, Section 1.23.1.A, page 1-61 indicates that the new Contractor will "Receive a copy of all files pertaining to activities of the prior Contractor one (1) week prior to the Assumption of Operations". Would CDHS please clarify whether the file transfer described in this section refers to a final transfer of data and that this 1 week time frame does not include data conversion testing and file transfer testing?	Yes, the file transfer described in this section refers to a final transfer. The one (1) week time frame does include data conversion testing and file transfer testing.
269	Exhibit A, Attachment I, Takeover	1.5	1-4	Would CDHS please clarify that the Project Management Software noted as deliverable number eight under "Customer Service" in Exhibit A, Attachment 1, section 1.5, page 1-4, will be due 2 weeks after CED?	The deliverable 'Project Management Software' has been revised to the 'Project Management Status Reports Format' deliverable. The deliverable will now be due three (3) months prior to Assumption of Operations. The language will be revised in an addendum.
270	Exhibit A,	1.5	1-5	The sixth milestone in Exhibit A,	Correct. The reference on page 1-5 will be

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	Attachment I, Takeover			Attachment I, Section 1.5, page 1-5, under the Enrollment/Disenrollment section of the Takeover Schedule “Contractor Ensures its PG is Fully Staffed and Operational” does not appear to be discussed in Section 1.12.5. Would CDHS please clarify if this milestone should refer to RFP Section 1.12.9 instead of 1.12.5?	corrected to reference Section 1.12.11 in an addendum.
271	Exhibit A, Attachment I, Takeover	1.5	1-7	The second milestone in Exhibit A, Attachment I, Section 1.5, page 1-7, under the HPE Process section of the Takeover Schedule “Contractor Ensures its SG is Fully Staffed and Operational” does not appear to be discussed in Section 1.19.1.B. Would CDHS please clarify if this milestone should refer to RFP Section 1.20.5 instead of 1.19.1.B?	Correct. The reference on page 1-7 will be corrected to 1.19.10 in an addendum.
272	Exhibit A, Attachment I, Takeover	1.5	1-7	The third milestone in Exhibit A, Attachment I, Section 1.5, page 1-7, under the HPE Process section of the Takeover Schedule “Submit Project Tracking Reports Formats” does not appear to be discussed in Section 1.19.1.C. Would CDHS please clarify which Section this milestone should refer to?	The Project Management Tracking Report format requirement is in Section 1.19.9. This language will be revised in an addendum.

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273	Exhibit A, Attachment I, Takeover	1.5	1-7	The first milestone in Exhibit A, Attachment I, Section 1.5, page 1-7, under the Contractor Staff Proficiency Testing section of the Takeover Schedule "Ensure Testing Completion" references Section 1.20.3.6.B. Would CDHS please clarify if the reference should be to Section 1.20.3.6.A, Assumption B?	The first milestone in Exhibit A, Attachment I, Section 1.5, page 1-7, should reference 1.19.7.5.4. The language will be revised in an addendum.
274	Exhibit A, Attachment I, Takeover	1.5	1-8	<p>Exhibit A, Attachment I, Section 1.5, page 1-8, under the section of the Takeover Schedule titled "Administration"; the following two milestones/deliverables are designated as being due in the Narrative Proposal:</p> <p>3. "Submit Request for Approval of Required Insurance and/or Bonding by Other Than Third Party Carrier".</p> <p>4. "Submit Proof of Insurance and Bonding"</p> <p>However, the RFP Section reference (Exhibit E, 35.A & B, page 40 of 57) appear to indicate a different due date:</p> <p>A. "Evidence of the insurance coverage required by paragraph (C) below must be submitted to</p>	The Exhibit E, 35.A & B, page 40 of 57, language is correct. The language in Exhibit A, Attachment I, Section 1.5, page 1-8, Takeover Schedule titled "Administration" shall be corrected to read in the Due Date column 'Prior to CED'. The language will be revised in an addendum.

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				<p>the Contracting Officer prior to the CED"</p> <p>B. "...Any request to use coverage other than standard insurance from a third party carrier must be submitted to the Contracting Officer in writing within ten (10) calendar days after the notice of intent to award the Contract."</p> <p>Would CDHS please clarify the date these deliverables are due?</p>	
275	Exhibit A, Attachment I, Takeover	1.6.1.D	1-10	<p>Exhibit A, Attachment 1, Section 1.6.1.D, page 1-10, requires "A narrative description of each task/activity on the schedule." be included on the Gantt chart. The Gantt chart for a project of this size may be comprised of several thousand tasks. A narrative description of each task could create a very long Gantt chart depending on what level of detail "a narrative description" is interpreted to be. Would CDHS please provide an example or definition of "a narrative description" (such as length or level of detail)? Would CDHS consider a descriptive name for each task/activity in the Schedule/Gantt chart sufficient</p>	<p>The CDHS prefers a brief descriptive name be used for each task/activity, with a narrative description being provided at the deliverable level with the proposal.</p>

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				with a narrative description being provided at the deliverable level within the proposal?	
276	Exhibit A, Attachment I, Takeover	1.8.C.16	1-17	Exhibit A, Attachment 1, 1.8.C.16, page 1-17, indicates the new Contractor will be required to take over and utilize State owned equipment from the previous Contractor. Would CDHS please provide a detailed inventory of this equipment so that Bidders can correctly price and plan for the Takeover of the HCO Program? For computers, telephones or other hardware/software included in the inventory, to ensure compatibility and functionality, could CDHS please provide hardware manufacture and model numbers?	This information is located in the Data Library.
277	Exhibit A, Attachment I, Takeover	1.9.2.1	1-19	Would CDHS please clarify if the 10 temporary CDHS staff (for Takeover and Acceptance Testing) be part of the 40 permanent CDHS employees? Or should the Contractor plan space for 50 staff to ensure a staffing overlap to provide a smooth transition from Takeover to Operations?	The ten temporary CDHS staff (for Takeover and Acceptance Testing) are not a part of the forty permanent CDHS employees.
278	Exhibit A,	1.10.4.1.4	1-21	Exhibit A, Attachment 1, Section	There should be no costs associated with

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	Attachment I, Takeover			1.10.4.1.4, page 1-21, states that the Contractor will "...form agreements to maximize the number of referrals to 1-ESRs, thereby achieving the ultimate goal of mandatory attendance at informing presentation..." If there are any costs associated with these agreements, would CDHS please provide information on the current cost of the agreement(s) for utilization of space and resources from the hosting entity?	these efforts for the Contractor in conjunction with County Social Services to strategize to increase attendance to presentations.
279	Exhibit A, Attachment I, Takeover	1.11.2.A	1-25	Exhibit A, Attachment I, Section 1.11.2.A, page 1-25, states the Contractor must be "...fully staffed and operational three (3) months prior to the Assumption of Operations." Would CDHS please clarify that this requirement means that Bidders should take into consideration the increased cost for having appropriate staff producing and mailing informing materials?	This language will be revised in an addendum to read, A. Three months prior to the Assumption of Operations, demonstrate to CDHS that they will be fully staffed and operational. Fully operational means..., will be revised in an addendum.
280	Exhibit A, Attachment I, Takeover	1.12.5.1	1-27	The Information File Layout Descriptions Manual due to CDHS for review 3 weeks after CED does not appear to be listed in the Takeover Schedule in Exhibit A, Attachment 1, Section 1.5, page	The Information File Layout Descriptions Manual is required as part of the Takeover Schedule. This language will be revised in an addendum.

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				1-5. Would CDHS please confirm that this deliverable is required as part of the Takeover Schedule?	
281	Exhibit A, Attachment I, Takeover	1.12.5.2	1-27	Would CDHS please clarify if the Information File Installation Plan and the Data File Installation Plan required in section 1.20.1.2 on page 1-46 are the same deliverable? If not, would CDHS please clarify the difference between these two Plans?	The Information File Installation Plan is required if the Proposer proposes a manual system in its bid. The Data File Installation Plan is required if the Proposer proposes an automated system in its bid.
282	Exhibit A, Attachment I, Takeover	1.12.6.1	1-28	The deliverable to update and submit the Process Testing Plan one month after CED does not appear to be included in the Takeover Schedule in Exhibit A, Attachment 1, Section 1.5, page 1-5. Would CDHS please clarify if this milestone is required as part of the Takeover Schedule?	The 'Process Testing Plan' has been revised as the 'Integrated Testing Plan' and is required as part of the Takeover Schedule. The language will be revised in an addendum.
283	Exhibit A, Attachment I, Takeover	1.11.3	1-5 and 1-25	The Takeover Schedule in Exhibit A, Attachment 1, Section 1.5, page 1-5, lists 4 milestone/deliverables for Medi-Cal Publications that do not seem to be referenced in the Section 1.11 or 1.11.3 on page 1-25. They are; "Submit Materials Development... .", Ensure Sufficient Staff for Printing.....",	CDHS will delete the four milestone/deliverables from Section 1.5. There will now be five (5) milestone/deliverables that correspond to Section 1.11.3

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				Obtain Informing Materials....”, and “Ensure Adequate Inventory.....”. Please clarify if these deliverables/milestones are required, and if so, what is the difference between this plan and the Medi-Cal Publications Plan referenced next on the schedule?	
284	Exhibit A - Attachment I - Takeover -	Section 1.9.1.D.7	Takeover 1-18	Sacramento County requires sprinklers throughout the building. The NFPA - 13 and FPS - 442.501 do not allow buildings to have partial installation of sprinklers even when augmented with halon or other fire suppression systems. Only in certain circumstances is this allowed under the floor but not above ground. As a result, how will the Contractor comply with Section 1.9.1.D.7 which requires fire suppression that doesn't damage equipment when Sacramento County, its Fire Prevention Standards and the National Fire Protection Act require sprinklers throughout the entire building.	An addendum will be issued regarding this section.
285	Exhibit A - Attachment I - Takeover -	Section 1.9.2	Takeover 1-19	Does CDHS have a preferred number of cubicles that the Contractor should include in the	It is unknown at this time how many cubicles will be necessary. However, the Contractor is not financially responsible for

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				facility plan to accommodate the forty (40) permanent CDHS staff described in Section 1.9.2. By reading the RFP, it would appear that 40 staff plus 3 staff (temporary positions) minus 5 managers offices, minus 2 confidential staff offices would leave a requirement for 36 cubicles, is this CDHS intent?	the purchase of cubicles for CDHS staff.
286	Exhibit A, Attachment I - Takeover	1.20.1.3 A. / 1.20.2	Takeover 1-46 & Takeover 1-47	Please provide a detailed explanation related to the appropriate use and availability of live data? While the Contractor will have access to a small number of "de-identified" records (1000 records), higher volumes may be needed to perform stress testing and at some point, live data will be needed to ensure we have a "robust" data set to test.	We do not permit the use of live data for testing purposes in order to protect the confidentiality of Protected Health Information as required by the Health Insurance Portability and Accountability Act.
287	Exhibit A, Attachment 1 - Takeover	1.8 C 3 a	1-15	Are current Presentation site agreements available for prospective vendors? Does the State have a preference concerning maintaining the use of these sites?	Although CDHS does not prefer the use of current sites, these sites, over a period of time, have proven the most productive and cooperative in making referrals to the Enrollment Service Representatives (ESR).
288	Exhibit A, Attachment I - Takeover	1.9.1.J	1-18	Is there a detail inventory of all equipment that will be turned over by the prior vendor?	Yes, there is a detailed inventory of all equipment that will be turned over by the prior vendor. This information is located in the Data Library.

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289	Exhibit A, Attachment I - Takeover	1.9.2.1	1-19	For what time period will the contractor need to provide temporary space for the ten temporary Takeover and Process Acceptance Testing staff?	The Contractor will need to provide temporary space for the ten (10) temporary Takeover and Process Acceptance Testing staff during the entire Takeover time period.
290	Exhibit A, Attachment 1 - Takeover	1.10.6	1-23	Will the Customer Service Portal require any access to Protected Health Information that would require authentication of the beneficiary? If so, what procedure must be used to authenticate the beneficiary?	At this time, the CDHS does not anticipate that any Protected Health Information (PHI) will be accessible via the Customer Service Portal. If, in the future, this changes, CDHS will work with the Contractor to review and approve the procedures for authentication that the Contractor proposes.
291	Exhibit A, Attachment I - Takeover	1.12.7.9	1-38	Is the back-up and recovery facility also required to be within 30 miles of the Capital?	No, the back-up and recovery facility(ies) is not required to be within thirty (30) miles of the Capital.
292	Exhibit A, Attachment I - Takeover	1.16.2.D	87 (RFP Main), Takeover 1-6	The evaluation section page 87 indicates that there are 4 points for the evaluation of the RR Policies and Procedure Manual and the RFP in Takeover page 1-6, 1.16.2.D indicates that the Manual should be submitted (not updates) 4 months prior to assumption of operations.	The Main Section language has been revised to read the Records Retention and Retrieval Plan is due in the Narrative Proposal. Takeover language will be revised to read updates to the Plan are due four (4) months prior to Assumption of Operations. This language will be revised in an addendum.
293	Exhibit A, Attachment I - Takeover	1.11.2, 1.11.3	1-24, 1-25	a. Please clarify the difference between the two Plans listed in the Takeover Section: b. Submit Medi-Cal Publications Plan 3 months before Assumption of Operations (listed in both the Takeover Schedule table and	This language has been revised and should provide a clear description of the deliverables and due dates. This language will be revised in an addendum.

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				Medi-Cal Publications Takeover Narrative) and c. Submit Materials Development, Production and Mailing Function Plan for Medi-Cal Publications 3 weeks after CED (listed in the Takeover Schedule but not in the Medi-Cal Publications Takeover Narrative)	